U.S. Department of Labor Employment Standards Administration Office of Labor-Management Standards Washington, DC 20210

FORM LM-2 LABOR ORGANIZATION ANNUAL REPORT

Form Approved
Office of Management and Budget
No. 1215-0188
Expires: 07-31-2004

MUST BE USED BY LABOR ORGANIZATIONS WITH \$200,000 OR MORE IN TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS IN TRUSTEESHIP

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.	
For Official Use O	
8. MAILING ADDRESS First Name	
Teach of the undersigned, duly authorized officers of the above labor organization, declares, under the applicable penalties of law, that all of the information submitted in this febort (including the information contained in accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. See Section of on penalties in the instructions.) 76. SIGNED: PRESIDENT 77. SIGNED: (If other title, see instructions.) PRESIDENT Date Telephone Number Page 126 2003 (30) 967 4700 See instruction	

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10. Have a "subsidiary organization" as defined in Section X of the instructions?	Yes No X	18. How many members did your organization have at the end of the reporting period? 19. What is the date of your organization's next regular election of officers? 20. What is the maximum amount recoverable under your organization's fidelity bond for a loss caused by any officer or employee of your organization? 5 0 0 0 0 0
13. Acquire or dispose of any goods or property in any manner other than by purchase or sale?		21. What are your organization's rates of dues and fees? (Enter a minimum and maximum if more than one rate applies for any line.) Rates of Dues and Fees (a) Regular Dues/Fees \$ 13.63/18.63 per Month (Month, Year, etc.) (b) Initiation Fees (c) Transfer Fees (d) Work Permits \$ none per (Month, Year, etc.)
 (Answer "Yes" even if there has been repayment or recovery.) 16. Have any officer who was paid \$10,000 or more by your organization and also received \$10,000 or more as an officer or employee of another labor organization or of an employee benefit plan? 17. Liquidate or reduce any liabilities without disbursement of cash? 		22. During the reporting period, did your organization have any changes in its constitution and bylaws (other than rates of dues and fees) or in practices/ procedures listed in the instructions?
(If the answer to any of the above questions is "Yes," pro in Item 75 as explained in the instructions for each item.)	vide details	24. Did your organization have any contingent liabilities at the end of the reporting period?

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STATEMENT A - ASSETS AND LIABILITIES

FILE NUMBER: 0 0 0 - 1 0 7

Complete Schedules 1 Through 15 Before Completing Statement A

Enter Amounts in Dollars Only -- Do Not Enter Cents

	ASSETS Item	From SCH #	Start of Reporting Period (A)	End of Reporting Period (B)
	25. Cash		1 4 6 5 9 8 6 7	2 3 6 3 7 2 1 5
	26. Accounts Receivable		5 7 6 6 4 3	7 5 3 2 8 2
STE	27. Loans Receivable	1 1	1 5 6 3 4 9 3	1 7 8 0 5 6 4
ASSETS	28. U.S. Treasury Securities		1 3 3 4 6 0 5 9	9 6 1 7 4 8 3
	29. Investments	2	1 4 7 1 7 2 9 3 8	1 4 9 9 9 5 3 9 2
	30. Fixed Assets	5	4 6 3 1 2 1 1 2	4 5 0 1 6 5 0 8
	31. Other Assets	3	2 7 5 8 5 4 1	3 3 3 6 6 9 1
	32. TOTAL ASSETS		2 2 6 3 8 9 6 5 3	2 3 4 1 3 7 1 3 5
	LIABILITIES	From SCH #	Start of Reporting Period (C)	End of Reporting Period (D)
•	33. Accounts Payable		0	0
TES	34. Loans Payable	8	6 6 4 4 1 3 9	6230988
LIABILITIES	35. Mortgages Payable		0	0
LA	36. Other Liabilities	4	6 3 4 8 2 7	3 1 1 2 5 9
	37. TOTAL LIABILITIES		7 2 7 8 9 6 6	6 5 4 2 2 4 7
	38. NET ASSETS (Item 32 less Item 37)		2 1 9 1 1 0 6 8 7	2 2 7 5 9 4 8 8 8
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STATEMENT B - RECEIPTS AND DISBURSEMENTS

FILE NUMBER: 0 0 0 - 1 0 7

Complete Schedules 1 Through 15 Before Completing Statement B

Enter Amounts in Dollars Only -- Do Not Enter Cents

CASH RECEIPTS	From SCH #	AMOUNT	CASH DISBURSEMENTS	From SCH #	AMOUNT
39. Dues		9 3 6 9 2 4 5	56. To Officers	9	1 3 6 5 0 5 6
40. Per Capita Tax		8 4 4 1 4 4 3 4	57. To Employees	10	2 2 7 9 4 1 4 8
41. Fees		0	58. Per Capita Tax		0
42. Fines		0	59. Fees, Fines, Assessments, etc		3 7 0 2 5 0 3
43. Assessments		0	60. Office & Administrative Expense	13	1 1 0 1 4 2 6 3
44. Work Permits		0)	61. Educational & Publicity Expense		1 5 2 8 6 1 2
45. Sale of Supplies		677840	62. Professional Fees		2 8 2 3 6 3 7
46. Interest		1 1 5 3 7 4 7 9	63. Benefits	11	1 3 8 0 2 5 5 9
47. Dividends		5 0 9 5 6 5	64. Contributions, Gifts & Grants	12	5 0 6 6 8 2
48. Rents		8 4 5 1 2	65. Supplies for Resale	i	950917
Fixed Assets	6	5 7 1 7 0 3 4	66. Direct Taxes		5 9 8 6 5 3 4
50. Loans Obtained	8	0	67. Withholding Taxes		1 0 5 5 2 0 0 9
51. Repayments of Loans Made	1	8 2 9 2 9	68. Purchase of Investments & Fixed Assets	7	2658320
52. On Behalf of Affiliates for Transmittal to Them		0	69. Loans Made	1 1	0
53. From Members for Disbursement on Their Behalf		7 7 4 9 2	70. Repayment of Loans Obtained	8	4 1 3 1 5 1
54. Other Receipts	14	7 4 5 7 0 1 3	71. To Affiliates of Funds Collected on Their Behalf	 	0
			72. On Behalf of Individual Members		7 6 7 9 3
			73. Other Disbursements	15	3 2 7 7 5 0 1 1
55. TOTAL RECEIPTS		1 1 9 9 2 7 5 4 3	74. TOTAL DISBURSEMENTS		1 1 0 9 5 0 1 9 5

Enter Amounts in Dollars Only -- Do Not Enter Cents

SCHEDULE 1 – LOANS RECEIVABLE

List below loans to officers, employees, or members which at any time during the reporting				Loai					Rep	oayı	nen	ts F	ecei	ved During Period					ans			
period exceeded \$250 and list all loans to business enterprises regardless of amount. (A)			Out: Star	stand t of I (B)	Perio	at od		Loans Made During Period (C)		ash ()(1				Other Than Cash (D)(2)			Out	star d of (E	Per	g at iod		
1. Name: IAM & AW DL 74 Purpose: FINANCIAL ASSISTANCE Security: NONE Terms: ON DEMAND			1	5	6	5	0	0		1	1 1	0	0	0			1	4	. 5	5 (5	0
2. Name: IAM & AW DL 92 Purpose: FINANCIAL ASSISTANCE Security: NONE Terms: ON DEMAND				5	0	0	0	0	ţ	5	0 '	0	0	0								0
3. Name: IAM & AW LL 778 Purpose: FINANCIAL ASSISTANCE Security: NONE Terms: DUE 9/1/07							0	0	5 8	3	0	0	0	0		2	4	2	· C) (0	0
4. Totals from additional pages (if any)	1	5	4	2	8	4	3	0	1	8	8	2	9	0	1	5	2	. 4	1 ()	1	4
5. Totals of loans not listed above							0	0					0	0			"					0
6. Totals of Lines 1 through 5	1	5	6	3	4	9	3	0	8	2	9	2	9	0	1	7	8	() !	5	6	4
The totals from Line 6 are entered in			. Itei Co	n 27 Iumr	 ı (A)			ltem 69	Item 5	1		.,,	•••••	ltern 75 with Explanation			Item	27 C	olur	nn ((B)	

SCHEDULE 2 - INVESTMENTS (OTHER THAN U.S. TREASURY SECURITIES)

FILE NUMBER: 0 0 0 - 1 0 7

SCHEDULE 3 - OTHER ASSETS

Description (A)				A	mou (B)				
Marketable Securities 1. Total Cost	1	4	2	2	3	1	7	6	3
2. Total Book Value	1	4	2	2	3	1	7	6	3
List each marketable security which has a book value over \$1,000 and exceeds 20% of Line 2.									
(a) None									0
(b)									
(c)									
(d)	-	, <u>.</u>							
Other Investments						_	_	_	
4. Total Cost			7	7				2	
5. Total Book Value			7	7	6 —	3	6	2	9 —
6. List each other investment which has a book value over \$1,000 and exceeds 20% of Line 5. Also list each subsidiary for which separate reports are attached.									
AFL-CIO HOUSING INVESTMENT (a) TRUST			7	7	6	3	6	2	9
(b)									
(c)									
(d)		<u></u>							
(e) Total from additional pages (if any)									
7. Total of Lines 2 and 5	1	4	9	9	9	5	3	9	2
The total from Line 7 is entered in			. Iter	n 29	3, Cc	dumi	n (B))	<u></u>
orm LM-2 (Revised 2000)			-						2 -

Description (A)			Вос	ok V (B)	alue			
1. PREPAID INSURANCE & POSTAGE			1	2	3	1	2	3
2. INVENTORIES	·	3	1	6	0	5	1	9
3. SECURITY DEP. FOR OFFICE SPACE				1	5	0	0	0
4. DUE FROM STAFF PENSION PLAN					8	8	9	1
5. DEPOSIT ON EQUIPMENT					3	0	0	0
6. Total from additional pages (if any)				2	6	1	5	8
7. Total of Lines 1 through 6		3	3	3	6	6	9	1
The total from Line 7 is entered in		I	tem	31, (Colui	mn (B)	

SCHEDULE 4 - OTHER LIABILITIES

Description (A)			nt at Perio	d		
1. PAYROLL TAXES WITHHELD		9	0	2	7	8
_{2.} FUNDS DUE TO OTHERS	2	2	0	9	8	1
3.						
4.						
5.						
6. Total from additional pages (if any)						
7. Total of Lines 1 through 6	3	1	1	2	5	9

SCHEDULE 5 - FIXED ASSETS

FILE NUMBER: 0 0 0 - 1 0 7

Description (A)			ther	st or Bas						unt		atio ens					٧a	ook alue D)						٧	Mar /alue (E)			
1. Land (give location): PRES. CORP. CENTER- PG COUNTY,MD	3	5	4	9	6	6 (כ								3	5	4	9	6	6	0		3	5 4	4 9	6	6	0
2. Totals from additional pages (if any)		6	8	0	1	2 3	3									6	8	0	1	2	3			6 {	8 0	1	2	3
3. Buildings (give location): PRES. CORP. CENTER-PG CTY,MD	2 5	9	4	6	3	7 4	4	8	9	5	4	0	2 3	1	6	9	9	2	3	5	1	1	6	9 !	9 2	3	5	1
4. Totals from additional pages (if any)	1 8	5	5	4	7	3 6	3	6	5	1	9	8	1 5	1	2	0	3	4	8	9	1	1	2	0 (3 4	8	9	1
5. Automobiles and Other Vehicles		4	7	0	5	9 8	3		4	1	4	9	7 7				5	5	6	2	1			í	5 5	6	2	1
6. Office Furniture and Equipment	1 2	1	4	6	4	8 8	3	8	1	6	6	2	3 6		3	9	8	0	2	0	2		3	9 {	8 0	2	0	2
7. Other Fixed Assets	1 0	2	8	3	0	3 2	2	2	5	5	9	3	7 2		7	7	2	3	6	6	0		7	7 :	2 3	6	6	0
8. Totals of Lines 1 through 7	7 1	6	3	1	0	1	1 2	2 6	6	1	4	5	3	4	5	0	1	6	5	0	8	4	5	0	1 6	5	0	8
The total from Line 8, Column (D) is entered in															Item	30,	Colu	mn ((B)		•							

SCHEDULE 6 - SALE OF INVESTMENTS AND FIXED ASSETS

Description <i>(if land or buildings, give location)</i> (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. US TREASURY SECURITIES	19656596	19656596	21060996	21060996
2. MARKETABLE SECURITIES	52449951	52449951	55937050	55937050
3. LAND AND BUILDING- KANSAS CITY, MO	510000	474444	300000	0
4. BUILDING- RIVERSIDE, MO	789429	789429	789429	789429
5. Totals from additional pages (if any)	404821	86547	10320	10320
6. Totals of Lines 1 through 5	73810797	73456967	78097795	77797795
	7. Less Reinvestments			72080761
	8. Net Sales		5	7 1 7 0 3 4
The total from Line 8 is entered in			Item	49

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SCHEDULE 7 - PURCHASE OF INVESTMENTS AND FIXED ASSETS

FILE NUMBER: 0 0 0 - 1 0 7

Description <i>(if land or buildings, give location)</i> (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1. US TREASURY SECURITIES	15928020	15928020	15928020
2. MARKETABLE SECURITIES	55656497	55656497	55656497
3. OTHER INVESTMENTS	496244	496244	496244
4. BUILDING IMPROVEMENTS- AT. MARY'S COUNTY, MD	26737	26737	26737
5. Totals from additional pages (if any)	2631583	2631583	2631583
6. Totals of Lines 1 through 5	74739081	74739081	74739081
	7. Less Reinvestments		72080761
	8. Net Purchases	2	6 5 8 3 2 0
The total from Line 8 is entered in		Ite	m 68

SCHEDULE 8 -- LOANS PAYABLE

													Rep	ayn	ent	Made	During Period			_					
Source of Loans Payable at Any Time During the Reporting Period (A)				s Ov t of F (B)	Perio			Loans Obtained During Period (C)					Cash D)(1				Other Than Cash (D)(2)						ved Perio		
1. SUNTRUST	6	6	4	4	1	3	9		0	4	ļ	1	3	1	5	1	0	6	3 2	2	3	0	9	8	8
2.																								·····	
3.																		_							
4.																		+							
5. Totals from additional pages (if any)																				_					
6. Totals of Lines 1 through 5	6	6	4	4	1	3	9		0	4	-	1	3	1	5	1	0	te	3 2	2	3	0	9	8	8
The total from Line 6 is entered in	***************************************		Ite Coli	m 34 umn	l (C)		•••••	Item 50		• • • • • • • • • • • • • • • • • • • •	1	tem	70		******		ltem 75 with Explanation			Ite	em (34 olum	n (C	 -	

SCHEDULE 9 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

FILE NUMBER: 0 0 0 - 1 0 7

(A) Name (List all persons who held office during the return they received no salary or other disbursement	eporting period even if nts.)	(be	3ro											Di	sb. for				ts		Other		•						
(B) Title (Entertitle of officer, such as PRESIDENT or TR	Status (C)*	oth			luct				Allo		anc	es				ısir (F	es				ursem (G)		ts				ota (H)		
BAY AM 1. VICE PRESIDENT	С	1	6	6	5	3	1		1	7	5	1	2		2	8	8	3	0				0		2	1	2	8	7
BUFFENBARGER RT 2. INTL PRESIDENT	С	1	9	3	3	9	0		1	6	0	4	9		3	9	8	1	1				0		2	4	9	2	5
HOOPER GH 3. VICE PRESIDENT	С	1	6	6	5	3	1		1	4	7	0	6		4	1	9	5	2				0		2	2	3	1	8
MART WL 4. VICE PRESIDENT	С	1	6	6	5	3	1		1	4	5	4	7		2	9	5	3	1				0		2	1	0	6	0
PEARSON L 5. VICE PRESIDENT	С	1	6	6	5	3	1		1	3	1	0	4		2	3	9	0	1				0		2	0	3	5	3
RITCHIE DL 6. VICE PRESIDENT	С	1	6	6	5	3	1		1	2	7	4	2		2	6	3	9	2				0		2	0	5	6	6
"ROACH, JR." R VICE PRESIDENT	С	1	6	6	5	3	1		1	2	8	8	1		3	3	0	0	6				0		2	1	2	4	1
8. Totals from additional pages (if any)			3	4 9	9 1	7	7		2	6	4	8	7	-	7 (3 (6	8	3				0			1 5	2	3	4
9. Totals of Lines 1 through 8		1	5	4 ·	1 7	7 5	3	1	2	8	0	2 8	3	3 (0 ()	1	0	6	ř			0		1 9) 6	; 9 —	8	8
														10.	Le	ss [Dec	iuc	tion	s			6	0	4	. ; ===	8	3	1
The total from Line 11 is entered in							[1	tem	56					11.	Ne	t Di	sbu	urs	eme	ents	1		3	6	5		0	5	6
*Code for Status (C): past officer - P; continuing officer - C	C; new officer during th	e repo	rting	pe	riod	- N	١.							(If	any ur c	offi rgai	cer niza	wa tior	s no i's co	t elected : onstitution	at a regu n and by	ılar ı laws	elect	ion ii plain	n ac in It	cord em	lancı 75.)	9 Wi	th

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SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES

FILE NUMBER: 0 0 0 - 1 0 7

(A) Name (List all employees who received method from your organization and any affiliate) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements liates.) (if applicable)	G (bet othe	er d	tax	ces ucti	an		Allow (anc E)	es		Disbursements for Official Business (F)	Disburs	her seme	nts			To (H			
ABELL 1. OFFICE SYS ADMIN	АМ		3	4	8	5	1			(0	4 2			0		3	3 4	8	9	3
N/A ADINOLFI	JV		9	1	2	4	4	6	7	7 (5	19874			0		1 1	7	8	9	3
2. GRAND LODGE REP																					
AGUILAR 3. CONFIDENTIAL SEC N/A	D		6	9	9	7	4		3	2 !	5	6 4 0			0		7	0	9	3	9
AKER 4. ADMIN CLERK N/A	RA		4	5	1	5	3			(0	0			0		4	5	1	5	3
ALEXANDER 5. TECHNOLOGY CLERK N/A	CD		5	2	4	5	4			(0	254			0		5	5 2	7	0	8
6. Totals from additional pages (if any)		8 3	4	3	3	3	7	8 0 2	2	1 6	3	195430			0	3 4	3	4	0 8	9 8	3
Totals for all employees who, during the rep \$10,000 or less in total disbursements fror any affiliates	porting period, received n your organization and		8	2	9	2	0		3	9 ()	3399			0			8	6 7	7 0	9
8. Totals of Lines 1 through 7		2 8	7	1 9	9	3	3	1809	7	0 6		4 2 1 9 6 3 9 9. Less Deductions	1	1		3 4 5		1	-		' 8 0
The total from Line 10 is entered in			••••••				Ite	em 57	<u>iriiriiii</u>			10. Net Disbursemer	nts 2	2	7	9	4	1	4		8

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SCHEDULE 11 - BENEFITS

FILE NUMBER: 0 0 0 - 1 0 7

Description (A)	To Whom Paid (B)	Amount (C)							
1. HEALTH AND WELFARE, DENTAL, VISION, LIFE	TRUST	{	3 6	3 8	}	3	6	8	8
2. STRIKE	MEMBERS	7	1 1	1		2	3	0	6
3. SCHOLARSHIP	MEMBERS & THIER CHILDREN			6	 }	1	7	5	5
4. PENSION	TRUST		7	7 ()	3	1	2	2
5. Total from additional pages (if any)				2 -	4	1	6	8	8
6. Total of Lines 1 through 5		1	3	8 (0	2	5	5	9

SCHEDULE 12 - CONTRIBUTIONS, GIFTS & GRANTS

SCHEDULE 13 - OFFICE & ADMINISTRATIVE EXPENSE

Description (A)					ount B)	t		
1. PRINTING			4	2	2	0	4	8
2. BOOKS, DUES, SOFTWARE		1	2	2	5	0	8	8
3. OFFICE SUPPLIES		1	3	7	7	0	4	6
4. EQUIPMENT RENTAL		1	0	8	6	7	0	5
5. POSTAGE			7	2	9	3	7	8
6. INSURANCE			3	6	0	6	1	2
7. Total from additional pages (if any)		5	8	1	3	3	8	6
8. Total of Lines 1 through 7	1	1	0	1	4	2	6	3
The total from Line 8 is entered in		••••		. Ite	m 60	3		-

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SCHEDULE 14 - OTHER RECEIPTS

Amount Description (A) (B) REIMBURSEMENT OF ADMIN 3 9 0 6 3 5 1.EXPENSES 2 TAXES RECEIVED FROM STAFF PENSION 4 1 2 6 3 1 0 4 ROYALTY REVENUES 1 3 2 5 2 0 7 REIMBURSEMENTS FROM 1 5 5 2 0 3 6 5. AFFILIATES 6. SCHOLARSHIP FUND CONTRIBUTIONS 6 2 8 2 5 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. Total from additional pages (if any) 7 4 5 7 0 1 3 17. Total of Lines 1 through 16 The total from Line 17 is entered in Item 54

SCHEDULE 15 - OTHER DISBURSEMENTS

Description (A)					oun B)	t		
1.FINANCIAL ASSIST PAID TO LOCALS	2	2	7	3	4	9	2	9
2.INTEREST EXPENSE		·	4	5	5	0	9	7
3.TAXES REMITTED ON BEHALF OF								0
4. STAFF PENSION		4	1	2	6	3	1	0
5,OTHER PAYROLL WITHHOLDING		2	0	5	3	2	1	4
DISBURSE ON BEHALF OF 6-AFFILIATES		1	7	8	7	4	0	7
7.NON- ALLOCABLE TRAVEL		1	3	1	5	6	0	0
8,CURRENCY TRANSLATION			3	0	2	4	5	4
9.								
10.								
11.								
12.								
13								
14.								
15.								
16. Total from additional pages (if any)								
17. Total of Lines 1 through 16	3	2	7	7	5	0	1	1
The total from Line 17 is entered in				Ite	em 7	73		

ORGANIZATION NAME: MACHINISTS AFL-CIO	 	
ENDING DATE OF PERIOD COVERED: 12/31/2002		

SCHEDULE 9 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

(A) Name (List all persons who held office during the reporting period every they received no salary or other disbursements.)	ən if	Gross Sal			Disbursements for Official	Other	
(B) Title (Enter title of officer, such as PRESIDENT or TREASURER.)	Status (C)*	other deduc (D)		Allowances (E)	Business (F)	Disbursements (G)	Total (H)
THAYER RV	_	1 6 6 5	3 1	1 1 2 3 1	3 5 2 6 5	0	2 1 3 0 2 7
VICE PRESIDENT	С						
WHARTON DE		1 8 2 6	4 6	15256	41418	0	2 3 9 3 2 0
TREASURER	С						
							
		100					
				<u></u>	i		
	:						
	<u></u>						
				ı	:		

ORGANIZATION NAME:	
MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2002	

(A) Name (List all employees who received from your organization and any a	l more than \$10,000 in total disbursements affiliates.)	other ded	taxe	es a	and					•		burs or C Busi	ffic	ial		Oth								
(C) Name of Affiliated Organizatio	n (if applicable)	otne		D)	CIO	ns)	All	low I)	an E)	ces	6			-) -)	•3		Disburse (G)		s			otal (H)		
ALLEN	GR	1	0	0	3 (6 8	1	1	2	4	7	3	2	0	0 5	5		0		1	4	3 6	3 2	2 0
COOR AEROSPACE																								
N/A																								
ALLEN	G		9	1	2	4 4	 1	2	8	7	5	2	8	2	7 4	1		0	,	1	3	2 3	3 9	9 3
GRAND LODGE REP																								
N/A																								
ALLEN	PJ		6	9	9	7 4	 				0				9 4	1		0	,		7	0 0) (3 8
ADMIN CLERK TYPI																								
N/A																								
ALMEIDA	ВА		8	2	0	8 7		5	2	9	5		7	6	4 5	5		0	,		9	5 () :	2 7
RESEARCH ECONOMI	:																							
N/A																								
AMBROSE	EL		3	5	7	1 5			•	•	0				(+		0			3	5 7	,	1 5
UTILITY WORKER																								
N/A																								

ORGANIZATION NAME:	
MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2002	

(A) Name (List all employees who receifrom your organization and at (B) Position (Enter employee's job title., (C) Name of Affiliated Organization		Gr (befo	r de	axe	s a	nd	Α		var (E)	ces	S	f	bur or (Bus	Offic	cial		Other Disbursemer (G)	nts				otal H)		
ANDERSON COOR AUTOMOBILE N/A	BD	1	0	0 :	3 6	8 8	1	5	7	6	0	2	! 1	2	0	4		0	1	3	3 7	7 3	3 3	3 2
ANDERSON GRAND LODGE REP N/A	RE		9	0 7	7 6	8	1	0	1	0	0	1	9	5	0	4		0	1	2	2 C) 3	7	7 2
ANDERSON GUARD N/A	RS		3	 4	9 2	2 1					0					0		0		3	3 4	1 8) 2	2 1
ASHMAN GRAND LODGE REP N/A	CE		9	1 2	2 4	1 4	1	1	9	6	0	2	7	4	5	2		0	1	3	3 C) 6	5 5	5 6
BABINEAUX EXECUTIVE ASSIST N/A	DM	1	4	5 (0 4	1 3	1	0	5	0	9	2	2 0	7	4	4		0	1	7	' 6	6 2	2 \$	9 6

ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

(A) Name (List all employees who received more than \$10,000 in total disbursement from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
BABINEAUX TS JR CLERK TYPIST N/A	3 3 6 7 3	0	0	0	33673
BAILEY JL ADMIN STENO N/A	47288	0	0	0	47288
BARDIS LK ADMIN STENO N/A	47209	0	462	0	47671
BARKSDALE R AGREEMENT DATA S N/A	5 2 4 2 0	0	0	0	52420
BARRETT CR SR SECRETARY N/A	22857	0	0	0	22857

ORGANIZATION NAME: MACHINISTS AFL-CIO	 	
ENDING DATE OF PERIOD COVERED: 12/31/2002	 	

(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements iffiliates.) (if applicable)	Gr (befo	r de	axe	es a	and	All	owa (E		es		for (Bus	Offi		- 1	Other Disbursement (G)	nts				otal		
BATES COMMUNICATIONS R N/A	MC		8	2	0 8	8 7		3	3	5 5		8	5	1	7		0		g	9 3	3 9) 5	9
BEATON GRAND LODGE REP N/A	BW		9	1	2 4	4 4	1	0	2	0 5	2	2 6	6	0	6		0	1	2	2 8	3 0) 5	5 5
BECK-CHERNIK GENERAL COUNSEL N/A	А	1	3	8	5 8	8 6		6	7	9 5		 I 3	6	2	0		0	1	5	5 9) C) () 1
BECKHAM GRAND LODGE REP N/A	GA		8	7	4 ;	3 5	1	0	2	9 5	2	2 1	9	7 (6		0	1	1	9	7	' (6
BELTON JR CLERK TYPIST N/A	SM		3	9	8 ;	3 3				0					0		0		3	3 9	8 (3 3	3 3

ANIZATION NAME: CHINISTS AFL-CIO	FILE NUMBER: 0 0 0 -	107
NG DATE OF PERIOD COVERED:		

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more from your organization and any affiliate (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if a		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
BERRY ASST LIBRARIAN N/A	ME	5 2 2 6 8	0	0	0	52268
BERUBE GRAND LODGE REP N/A	L	91244	4740	14100	0	110084
BEYER COOK N/A	LM	3 4 2 9 2	0	0	0	3 4 2 9 2
BIALKOWSKI ADMIN STENO N/A	MA	47131	0	0	0	47131
BLACKMON GRAND LODGE REP N/A	B₩	91244	9845	22664	0	123753

12/31/2002

ORGANIZATION NAME:	 	
MACHINISTS AFL-CIO		
ENDING DATE OF PERIOD COVERED:		
12/31/2002		

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements ffiliates.) (if applicable)	Gi (befo	r de	axe	s a	nd	Allo	wan		s 	fe	or C Bus	em offici ines		Other Disbursements (G)	3			Tot (H			
BLAIS ADMIN ASST N/A	V	1	0	7	4 3	3 1	1 (8 (1	4	1	8	1	7 4	0		1	3	6	4	1	9
BOCCUCCI SR CLERK TYPIST N/A	С		3	7	9 6	0 6				0				0	0			3	7	9	6	0
BORMANN DIR GUIDE DOGS O N/A	JA	1	2	3	5 4	1 5	9	9 3	7	0	2	1	7	5 4	0		1	5	4	6	6	9
BOURNE ADMIN CLERK TYPI N/A	VA		4	4 :	9 9	9 6				0				0	0			4	4	9	9	6
BOWLES ASST COOK N/A	вк		3	0 :	2 4	1 6				0				0	0		_	3	0	2	4	6

ORGANIZATION NAME: MACHINISTS AFL-CIO
ENDING DATE OF PERIOD COVERED: 12/31/2002

(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements ffiliates.) (if applicable)	(bef	iross fore f er de (axe	es a	and	Α		/an E)	ces	;		or C Bus	Offic	ial	ts	Other Disbursements (G)	3		•	Tot (H			
BOX EDUCATION REP N/A	SM		7	6	2	6 5		7	2	3	0	1	5	2	4	2	0			9	8	7	3	3 7
BRADFORD GRAND LODGE REP N/A	RW		9	1	2	4 4	1	7	2	5	5	3	8	1	4	2	0		1	4	6	6	4	1
BRADLEY NETWORK ADMINIST N/A	ЈМ		6	3	3	1 2					0					0	0			6	3	3	1	2
BRAUCH SR SYSTEMS ANALY N/A	TG		8	9	7	1 0	_				0				_	0	0		•	8	9	7	1	0
BRICKNER GRAND LODGE REP N/A	TF		9	1	2	4 4	1	0	3	8	0	2	8	0	9	6	0		1	2	9	7	2	2 0

ATION NAME: NISTS AFL-CIO
NISTS AFL-CIO

ENDING DATE OF PERIOD COVERED:
12/31/2002

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received mor from your organization and any affilia (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (iii)	e than \$10,000 in total disbursements tes.) if applicable)	Gr (befo	r de	axe	es a	and		Allow (I	an E)	ces		Disbursements for Official Business (F)	Other Disbursements (G)				ota (H)			
BRIGGS GRAND LODGE REP N/A	R		9	1	2	4 4	4	1 3	7	5	0	30232	0	1	۱ (3 :	5 :	2	2	6
BRIGHTWELL HELP DESK TECHNI N/A	LS		5	8	8	6 1	1				0	0	0		į	5 ;	8 8	3	6	1
BROGNA GRAND LODGE REP N/A	LV		9	1	2 4	4 3	3	1 1	7	0	0	26894	0	1	1 2	2 :	9 {	3	3	7
BROOKS ADMIN STENO N/A	МВ		4	6	8 :	9 6	3		•		0	7 9	0		4	4 (6 9	9	7	_ 5
BROSSEAU GRAND LODGE REP N/A	G	-	9	6	5 (0 8	3	6	4	6	0	17897	0	1	1 2	2 (0 1	3	6	5

ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

(B) Position (Enter employee's job title.)	B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)		àхє	lary es and ctions)		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)				
BROWN GRAND LODGE AUDI N/A	SH	9	1	2 4	4	1 2 4 5 5	25531	0	1	2	9	2	3 0
BROWN ADMIN CLERK N/A	R	4	5	5 4	4	0	0	0		4	5	5	4 4
BROWN ASST GROUNDSKEEP N/A	CS	3	6	68	7	0	0	0		3	6	6	8 7
BUCKNER ADMIN CLERK TYPI N/A	JВ	4	5	0 1	3	0	0	0		4	5	0	1 3
BUELL COMMUNICATIONS R N/A	KG	5	4	7 7	2	5 8 0	1736	0		5	7	0	88

ORGANIZATION NAME: MACHINISTS AFL-CIO	 	
ENDING DATE OF PERIOD COVERED: 12/31/2002		

(B) Position (Enter employee's job title.)	nom your digamzation and any animates.)		Gross Salary (before taxes and other deductions) (D)			1	Allowances (E)			Disbursements for Official Business (F)		Other Disburseme (G)	nts			ota (H)	,			
BUHR ASST COOK N/A	KJ		3 (3 (3 4	5					0		O		0		3	0 8	3	4 5
BUPP EDUCATION REP N/A	NK		3 2	2 (0 8	7			5	4 (0	2	3 4		0		8	2 8	3	6 1
BURNEY ASST COOK N/A	PK	3	3 2	2 9	- 9 7	6				(0		O		0		3	2 9	7	7 6
BURNEY SYSTEMS ANALYST N/A	KT	2	2 (0 2	2 2	6			1	0 (0	2 1	4 6		0	!	2	2 4	1	7 2
CAMORLINGA GRAND LODGE REP N/A	М	8	3 8	3 6	8 8	5	1	3	8	1 :	5	268	7 2		0	1	2	9 3	3	7 2

ORGANIZATION NAME:	
MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	 -
12/31/2002	

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)		Gross Salary (before taxes and other deductions) (D)					Allowances (E)	isbursements for Official Business (F)	Other Disbursements (G)	Total (H)				
CAMP GRAND LODGE REP N/A	LW		9	1 2	2 4	4	13900	29872	0	1	3	5	0	1 6
CAMP RESEARCH AGREEME N/A	GA		6	4 {	8 3	6	1 4 0	9 5	0		6	5	0	7 1
CANNING ADMIN STENO N/A	TS		5	1 (6 5	9	0	285	0		5	1	9	4 4
CARELLI JR DIR GOVT EMPLOYE N/A	F	1	0	0 (3 6	8	7685	16412	0	1	2	4	4	6 5
CAREY MAID N/A	TY		2	7 2	2 3	7	0	0	0		2	7	2	3 7

ORGANIZATION NAME:	
MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2002	

(A) Name (List all employees who received more than \$10,000 in total disbursement from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
CARPENTER GE RESEARCH AGREEME N/A	6 4 8 3 6	0	0	0	64836
CARPENTER WJ HOUSEPERSON N/A	3 4 3 4 3	0	0	0	3 4 3 4 3
CARTER D CLEANING SUPERVI N/A	5 2 6 9 3	0	0	0	5 2 6 9 3
CELONA FV ADMIN ASST	107431	6 4 2 5	18758	0	132614
CHANEY GH SR SYSTEMS ANALY N/A	8 4 3 4 9	2 0	3 9	0	8 4 4 0 8

RGANIZATION NAME:		
MACHINISTS AFL-CIO		
NDING DATE OF PERIOD COVERED:	····	
12/21/2002		

	A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) B) Position (Enter employee's job title.)	(before	tax	(es	and		Disbursements for Official Business	Other					
(C) Name of Affiliated Organization (iii	f applicable)	other d	(D)		ons)	Allowances (E)	(F)	Disbursements (G)	:		ota (H)		
CHANEY	JM	6	9	9	9 9	0	1 6	0		7	0	0	1 5
CONFIDENTIAL SEC		•						:					
N/A	,												
CHERRY	С	9	1	2	4 4	7073	21631	0	1	1	9	9	4 8
SPECIAL REP													
N/A													
CHRISTIE	SM	7	5	8	1 0	6 0	1 2 8	0		7	5	9	9 8
JR EXECUTIVE SEC													
N/A													
CICERO	R	9	1	2	4 4	10704	24520	0	1	2	6	4	6 8
GRAND LODGE REP													
N/A		s											
CLARK	PA	4	5	0	0 7	0	0	0	!	4	5	0	0 7
ADMIN CLERK													
N/A													
	<u> </u>	L			- · · · - · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>						

ORGANIZATION NAME: MACHINISTS AFL-CIO	 <u> </u>	
ENDING DATE OF PERIOD COVERED: 12/31/2002	 	

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)		Gross Salary (before taxes and other deductions) (D)					1	Allowances (E)			Disbursements for Official Business (F)	Other Disbursements (G)			Tot		•	
CLAY GRAND LODGE REP N/A	FL		2	2 8	3 0	6	1	0	9	5	3 3 4 6	0		2	? 7	2	4	7
CLERMONT EDUCATION REP N/A	М		9		7 4	5	1 3	9	4	0	22091	0	1	2	2 8	7	7	6
COLLIS HELP DESK TECHNI N/A	ВА		6	4 9	 9 2	4		3	2	5	5 1 4	0		6	5 5	7	6	3
COMBS SPECIAL ASST TO N/A	C	1	2	3 5	 5	5	7	4	2	5	22142	0	1	5	3	1	1	2
CONLEY DIR TRANS ORG DE N/A	JG	1	2	4 3	3 0	3	7	2	6	5	22962	0	1	5	5 4	5	3	0

ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ed more than \$10,000 in total disbursements v affiliates.) On (if applicable)	Gross Salary (before taxes and other deductions) (D)			s and		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)	(H)			l		
CONNOLLY GRAND LODGE REP N/A	Т	9	1	2	2 4	4	9 1 0	0	21011	0	1	1	2	1 :	3	5 5
COOK ASST ADMIN BOOKK N/A	PL	2	4	7	7 5	3		0	0	0			2	4	7	5 3
COOKE GRAND LODGE REP N/A	SO	9	1	2	2 4	4	928	5	22280	0	1	1	2 :	2 8	В	0 9
COOPER GRAND LODGE REP N/A	J	9	1	2	2 4	4	1 6 9 5	5	32707	0	1	1	4 (0 \$	9	0 6
COOPER GRAND LODGE REP N/A	S	8	4	8	3 8	3	1 1 7 0	0	28959	0	1		2 :	5 \$	5	4 2

ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) (B) Position (Enter employee's job title.)		Gross Salary (before taxes and other deductions)					D	Disbursements for Official Business		Other				-							
(C) Name of Affiliated Organization	(if applicable)	other	ded (D		ons)		Allowances (E)					ine: F)	SS	Disbursem (G)	ents			Tot (H			
						+				_							_				
CORDONE	MC	1	U) 3	6 8	3	8	5	9 5	'	2 4	5	6 ('	0	1	3	3	5	2	3
DIR COMMUNITY SE																					
N/A																					
CORSON	C	1 (0 3	3 0	9 (5 (6	7 5	5	4	0	5 1		0	1	1	2	8	1	6
ASST GENERAL COU																					
N/A		:																			
COTTRELL	RA		4 4	1 9	3 5	5			C)			3 2	2	0		4	4	9	6	7
JR SECRETARY																					
N/A																					
COVINGTON	RG		1 5	5 4	3 5	5		4	5 5	;	4	0	3 3	3	0	 	1	9	9	2	3
GRAND LODGE REP																ŀ					ŀ
N/A																					
CRAMER	DR	1 :	2 5	5 4	6 (1	4	1 .	5 C)	1 1	5	9 2	2	0	1	4	. 1	2	0	2
CONTROLLER																					
N/A																					

ORGANIZATION NAME: MACHINISTS AFL-CIO		<u> </u>
ENDING DATE OF PERIOD COVERED: 12/31/2002	 	

(B) Position (Enter employee's job title.)	B) Position (Enter employee's job title.) C) Name of Affiliated Organization (if applicable)		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
CRAMER ADMIN CLERK TYPI N/A	ws	45794	0	2 0	0	45814
CRONIN ADMIN STAFF SECR N/A	BK	2 1 5 0 3	0	2 2	0	21525
CRONK ASST COOR RAILRO	JR	91244	9010	34893	0	135147
CROSS EDUCATION REP N/A	PT	82119	1 1 6 2 5	25477	0	119221
CROWDIS COOR AEROSPACE N/A	J	100368	15908	50465	0	166741

000000	 	
ORGANIZATION NAME:		
MACHINISTS AFL-CIO		
ENDING DATE OF PERIOD COVERED:	 	
12/31/2002		

(B) Position (Enter employee's job title.)	B) Position (Enter employee's job title.) C) Name of Affiliated Organization (if applicable)		Gross Salary (before taxes and other deductions) (D)				Allowances (E)			Disbursements for Official Business (F)			ıl	Other Disbursements (G)		(H)					
CUMMINGS COMMUNICATIONS R N/A	кт	8	2	1	1 9	9	·	7 2	. 8	5	1	6	7 5	5 0		0	1	0	6	1	5 4
CUMMINGS SYSTEMS ANALYST N/A	МJ	6	7	0	7 4	4				0				0		0		6	7	0	7 4
DALE ASST MANAGER FAC N/A	RM	6	4	2	7 2	2				0			4	10		0		6	4	3	1 2
DAMERON GRAND LODGE AUDI N/A	WP	9	1	2	4 4	4	1 2	2 3	3	5	3	1 9	9 8	3 6		0	1	3	5	5	6 5
DANIELS CONFIDENTIAL SEC N/A	E	6	9	9	7 4	4		7	8	0		2 2	2 4	1		0		7	2	9	9 5

ORGANIZATION NAME:	
MACHINISTS AFL-CIO	 •
ENDING DATE OF PERIOD COVERED:	
12/31/2002	

(A) Name (List all employees who rece from your organization and a (B) Position (Enter employee's job title (C) Name of Affiliated Organization		Gross Salary (before taxes and other deductions) (D)				nd	Ailowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)		(H)				
DAUGHERTY SUPERVISOR N/A	VL	:	7 (3 5	5 C) 4		0	1 9	0		٠	7 (6 5	5	2 3
DAVES GRAND LODGE REP N/A	TC		9	1 2	2 4	 1 4	7 2 2	5	23844	0		1 :	2 2	2 3	3	1 3
DAVIS UTILITY WORKER N/A	DC		3 4	4	1 3	3 0		0	0	0			3 4	4 1	f ·	3 0
DAVIS JR PILOT N/A	AT		7 :	5 9	9 2	2 5	963	4	16937	0	-	1 (0 1	2 4	1	9 6
DE GROAT ADMIN CLERK TYPI N/A	LR		4 \$	5 -	1 2	2 7		0	0	0		•	4 :	5 ¹	1	2 7

ORGANIZATION NAME:	 _		
MACHINISTS AFL-CIO			
ENDING DATE OF PERIOD COVERED:	 		
12/31/2002			

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
DE LA FUENTE LEGISLATIVE & PO N/A	RL	8 4 5 8 4	10305	25788	0	120677
DELAHAY GROUNDSKEEPER N/A	JR	37935	1 9 5	0	0	38130
DELFENDAHL ASST ADMIN BOOKK N/A	LL	47221	0	1 9	0	47240
DELIO ASST SUPERVISOR N/A	MK	68057	0	0	0	68057
DEMENT GUARD N/A	SW	27763	0	0	0	27763

ORGANIZATION NAME:
MACHINISTS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2002

FILE NUMBER: 0 0 0 - 1 0 7

(B) Position (Enter employee's job title.)	B) Position (Enter employee's job title.) C) Name of Affiliated Organization (if applicable)		Gross Salary (before taxes and other deductions) (D)			Allowance (E)	es	Disbursements for Official Business (F)	Other Disbursements (G)	(H)				
DOMINY GRAND LODGE AUDI N/A	SD	Ç	9 1	0	6 8	1 4 5 () 5	32727	0	1	3	8 3	3 (0
DONACHY ASST ADMIN BOOKK N/A	SE		1 6	3 1	0 6		0	1 5 0	0		1	6 2	2 5	5 6
DONALDSON UTILITY WORKER N/A	D		3 3	8 8	6 4		0	0	0		3	3 8	3 6	6 4
DORSEY ASST SECRETARY N/A	ML	1 (3 4	1 2	8 9	7 0 3	3 5	21065	0	1	6	2 3	3 8	3 9
DUGGAN HELP DESK TECHNI N/A	RM	4	4 7	7 9	1 1		0	676	О	i	4	8 5	5 8	3 7

MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements affiliates.)	(befo	Gross Salary (before taxes and other deductions) (D)					Allowances (E)			Disbursements for Official Business (F)			Disbu	Other Disbursements		Total (H)							
(O) Name of Affiliated Organization	T (" approauto)						-		(=	<u>, </u>		╁		<u> </u>		 	(G)				Ţ	<u>'</u>		
DUNMORE	CL		8	2 (0 8	3 7			3	3 6	5 5		1	0	2 3	3		0		8	3	4	7	' 5
COMMUNICATIONS R																								
N/A	Ĭ																							
DUNN	SE		9	1 :	2 4	4	-	۱ (0 9) 7	7 0	2	2 4	1	9 4	1		0	1	2	: 6	4	C	8 (
GRAND LODGE AUDI																								
N/A		!					!																	
EASTBURN	СJ	1	0	0 :	3 6	8 8			6 () 9	9 5	1	2	0	5 6	3		0	1	1	8	5	1	9
DIR WOMENS DEPT																								
N/A				-								İ												
EASTBURN	DB		7	8 :	 9 3	3 1				•••	0							0		7	8	9	3	3 1
MANAGER OF MATER																								
N/A							į																	
ELDRIDGE	RA		9	1 :	2 4	1 4		1	7 1	I 5	5 7	2	ļ 4	3	2 8	3	_	0	1	5	2	7	2	9
GRAND LODGE REP							[
N/A																								

ORGANIZATION NAME: MACHINISTS AFL-CIO	FILE NUMBER: 0 0 0 - 1 0
ENDING DATE OF PERIOD COVERED:	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

		Gross Salary (before taxes and other deductions) (D)					Allowances (E)				Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)					
EMMART SR SYSTEMS ANALY N/A	TL		8	1 4	4 5	5 0				0	990	0		8	2	4	4	10
EMMART SR HELP DESK TEC N/A	ТН		7	 7 !	— 5 7	' 2		1	4	0	9 9	0		7	7	8	1	1
ENGLER ASST SECRETARY N/A	WA	1	0 :	5 \$	9 9	3	4	1	2	5	14148	0	1	2	4	2	6	6 6
ENGLER JR CLERK TYPIST N/A	LA		3	7 :	5 3	3 7				0	0	0		3	7	5	3	3 7
ERLICHMAN DIR OF RESEARCH N/A	L	1	0 (0 ;	3 6	8	2	9	0	6	1839	0	1	0	5	1	1	3

12/31/2002

ORGANIZATION NAME: MACHINISTS AFL-CIO	······································	
ENDING DATE OF PERIOD COVERED: 12/31/2002	<u>. </u>	

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) (B) Position (Enter employee's job title.)		Gro (befo		axe	s ar	nd							Disbursements for Official Business			ial	Other						•	
(C) Name of Affiliated Organization	(if applicable)	omer	dec (E		non	(S)		Aii	owa E)		es		•		me: F)) 3	Disburseme (G)	nts			Tot (H			
EVANS	ES		9	1 2	2 4	1 4		1	1 -	1 (6	5	2	6	8	0 4		0	1	2	9	2	1	3
GRAND LODGE AUDI																								
N/A		:																						
FALCONER	G		8 2	2 '	1 1	9			6 7	7 (6	8	2	4	4	6 (,	0	1	1	3	3	4	7
EDUCATION REP		ļ																						
N/A																								
FARLOW	EA		1	7 8	3 5	 5 7						0				C		0		1	7	8	5	 5 7
ADMIN SECRETARY																								
N/A																								
FEARNS	CA		3 4	4 8	3 7	- ' 9	-					0) [0		3	4	8	7	· 9
COOK																								
N/A																	: -							
FEDO	G		8	7 (3 7	7		1	0 7	7	1 (0	2	0	8	7 ()	0	1	1	8	9	5	7
GRAND LODGE REP																								
N/A																	•							

					_
NIZATION NAME:	FILE NUMBER: 0	0.0	- 1	Ω	7
CHINISTS AFL-CIO				<u> </u>	<u>.</u>

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ed more than \$10,000 in total disbursements o affiliates.) On (if applicable)	Gro (befo other		axes duct	and		Allowance: (E)	S	Disbursements for Official Business (F)	Other Disbursements (G)			Γota (H)		
FELTON ADMIN STAFF SECR N/A	KT		6 2	2 7	7 5	0		0	1 6	0		6	2	7	6 6
FERGUSON GRAND LODGE AUDI N/A	S		8 2	2 6	8 8	3	1 3 8 7	5	25580	0	1	2	2	1	3 8
FICKE JR CLERK TYPIST N/A	SA		2 (6 6	5 5	5		0	0	0		2	6 (6	5 5
FIGUEROA GRAND LODGE REP N/A	CR		9	1 2	2 4	4	9 7 4	5	27339	0	1	2	8 ;	3	2 8
FILIPOVIC COOR RAILROAD N/A	М	1	0 (о з 	3 6	8	739	0	20593	0	1	2	8 ;	3	5 1

ORGANIZATION NAME:
MACHINISTS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2002

(B) Position (Enter employee's job title.)	B) Position (Enter employee's job title.) C) Name of Affiliated Organization (if applicable)			ixes luct	ary s and ions)		Allo	owan (E)			Disburs for C Bus	Officia	1	Other Disbursem (G)				「ota (H)		
FINN SR SYSTEMS ANALY N/A	СМ		8 5	5 C) 5	4	•	3	2	0	1	8 9	9 9		0		8	7 :	2	7 3
FISHER ACCOUNTANT N/A	LF		6 3	3 2	2 6	0				0			9		0		6	3 :	2	6 9
FITZGERALD ADMIN STENO N/A	ВР		4 6	5 9	7	8				0			0		0		4	6	9	7 8
FLOYD GRAND LODGE REP N/A	RJ	1	0 () 3	3 6	8	1 2	2 9	1	5	3 8	0 8	3 1		0	1	5	1 :	3	6 4
FLYNN DIR APPREN OSHA N/A	MJ	1	0 () 3	3 6	8	1 () 4	4	5	13	3 7	7 6		0	1	2	4	1	8 9

ODO AND TATION IN AND	
ORGANIZATION NAME:	
MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2002	

(A) Name (List all employees who received in from your organization and any affile) (B) Position (Enter employee's job title.)	nore than \$10,000 in total disbursements iliates.)	(before taxes and		Disbursements for Official Business	Other	
(C) Name of Affiliated Organization	(It applicable)	other deductions) (D)	Allowances (E)	(F)	Disbursements (G)	Total (H)
FONES	MA	56379	1 9 5	0	0	56574
KITCHEN SUPERVIS						
N/A						
FORD	NK	27001	0	0	0	27001
HOUSEPERSON						
N/A						
FORGIONE JR	F	91244	1 1 9 1 0	27811	0	130965
GRAND LODGE REP						
N/A					İ	
FOX	KM	5 2 4 1 4	0	0	0	5 2 4 1 4
AGREEMENT DATA S						
N/A					1	
FREITAG	JL	4 2 5 1 6	0	3 9 5	0	4 2 9 1 1
JR CLERK TYPIST	I					
N/A			_	s		

ORGANIZATION NAME: MACHINISTS AFL-CIO		
ENDING DATE OF PERIOD COVERED: 12/31/2002	 · · · · · ·	

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)		Gros (before other d	ta)	œs	and		Allowances		sbursements for Official Business	Other				
(C) Name of Affiliated Organization	(if applicable)		(D)		J.10,		(E)	 	(F)	Disbursements (G)		ota (H)	l 	
FRYE HOLLOWA	PC	4	9	9	4 7	7	0		7	0	4	9 9	9	5 4
SR STENO														
N/A														
FULLARD	TJ	2	3	5	7 4	4	8 2 0	-	10933	0	 3	5 3	3	2 7
SPECIAL REP														
N/A						ŀ								
GALLMAN	CL	2	8	0	7 (0		6631	0	3	4 7	7	0 1
ADMIN ASST														
N/A														
GARDNER	RE	4	6	0	1 6	3	0		3576	0	 4	9 8	 5	9 2
SR ASST BOOKKEEP		!						ļ						
N/A										i				
GATES	L	1	5	5	7 2	2	1 4 0		1 1 8	0	 1	5 8	3	3 0
COMMUNICATIONS R		:												
N/A											 			

ORGANIZATION NAME:			_
MACHINISTS AFL-CIO			
ENDING DATE OF PERIOD COVERED:			_
12/31/2002			

(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.) (if applicable)	Green (befo		axe: duct	s and		Allowar (E)		\$	Disbursements for Official Business (F)	Other Disbursements (G)			otal		
GEORGALLAS COMMUNICATIONS R N/A	D		8 2	2 (8 (7	7	8	5	1291	0		8	4 1	l (6 3
GEORGEN ADMIN STENO N/A	S		4 1	2 6	5 5	2			0	1 5	0		4	2 6	6 6	6 7
GIBSON SECRETARY N/A	CE		6 2	2 () 1	7			0	697	0		6	2 7	7 -	1 4
GIULIANI GRAND LODGE AUDI N/A	L		9	1 2	2 4	4	8 3	0	6	27159	0	1	2	6 7	7 (9
GLADSTEIN ASST DIR STRATEG N/A	NS		8 8	8 1	l 6	1	2 5	8	3	4937	0		9	5 6	6 8	3 1

ORGANIZATION NAME: MACHINISTS AFL-CIO			
ENDING DATE OF PERIOD COVERED: 12/31/2002	-		

(A) Name (List all employees who received m from your organization and any affil. (B) Position (Enter employee's job title.)	ore than \$10,000 in total disbursements iates.)	Gro (befo		axes	and		Δ.	llavva				urse r Off	icial	ts	Other				T = 2			
(C) Name of Affiliated Organization	(if applicable)	Outer	([10110	,	A	llowa (E		s 		(F)			Disburseme (G)	ทเธ			Tot (H			
GORDON	AE		5 2	2 3	3 4	8				0				8	<u></u> -	0		5	2	3	5	6
INFO TECHNOLOGY																						
N/A																						
GRAHAM	ВМ		2	7 7	' 8	1				0				0		0		2	7	7	8	1
MAID																						
N/A																						
GRANADO	AS		8 (5 7	' 8	4	1	7 (0 6	5	2	8 7	2	7		0	1	3	2	5	7	6
GRAND LODGE REP																						
N/A																						
GREEN	ва		 3 (3 5	5 5	4	<u> </u>			0				0		0		3	6	5	5	4
COOK																						ŀ
N/A																						
GREER	GL		9 .	1 2	2 4	4		8 4	4 9	0	2	2 3	2	2		0	1	2	2	0	5	6
GRAND LODGE REP																						
N/A								·														

ORGANIZATION NAME: MACHINISTS AFL-CIO		 	
ENDING DATE OF PERIOD COVERED: 12/31/2002			

(A) Name (List all employees who received more than \$10,000 in total disburser from your organization and any affiliates.) (B) Position (Enter employee's job title.)	(before taxes and		Disbursements for Official Business	Other	
(C) Name of Affiliated Organization (if applicable)	other deductions) (D)	Allowances (E)	(F)	Disbursements (G)	Total (H)
GROSS JM SUPERVISOR HEALT N/A	58802	0	613	0	59415
GUAY R GRAND LODGE REP N/A	15435	0	967	0	16402
GULLEY HL PROJECT MANAGER N/A	92402	3 2 0	959	0	93681
HALL CL RESEARCH ASSOCIA N/A	7 2 2 4 7	0	0	0	7 2 2 4 7
HALL JR EE GRAND LODGE REP N/A	91244	1 0 5 2 0	21524	0	123288

ORGANIZATION NAME:
MACHINISTS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2002

FILE NUMBER: 0 0 0 - 1 0 7

(A) Name (List all employees who received m from your organization and any affil (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements liates.) (if applicable)	Gr (befo	r de	axe	s an		Allov	var (E)	nces	 3	Disbursements for Official Business (F)	Other Disbursements (G)		,		otal H)		
HAMILTON GRAND LODGE AUDI N/A	RE		9	1 2	2 4	4	1 2	1	9	0	26672	0	1	1 3	3 () 1	(6
HAMILTON PUBLIC RELATIONS N/A	N	1	0	0 3	3 6	8	2	0	7	1	1051	0	1	1 (— Э 3	3 4	. 5	0 0
HAMILTON ATTORNEY LEGAL F N/A	DE		2	0 2	2 8	5		1	3	0	292	0		2	2 (7	. () 7
HANNA SR STENO N/A	LM	1	4	2 (6 O	3				0	0	0		4	1 2	2 6	. (3
HANNIGAN SPECIAL REP N/A	F		8	4 8	3 8	3	1 6	3	0	0	28795	0	1	1 2	2 9	9 9	7	7 8

ORGANIZATION NAME:

MACHINISTS AFL-CIO

ENDING DATE OF PERIOD COVERED: 12/31/2002

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements affiliates.) on (if applicable)	Gro (before other of	e tax	ces uctio	and		Allov	war (E)		3		urso r Ol usir (F	fici nes	al	Other Disbursements (G)			Γota (H)			
HANTZIS GRAND LODGE REP N/A	SJ	S	9 1	2	4 4		6	3	1	0	1	4	7 :	2 4	0	1	1	2	2	7	8
HARTFORD GRAND LODGE REP N/A	D	S	9 1	2	4 4		1 0	6	0	0	2	5	5 -	4 1	0	1	2	7	3	8	5
HASEL JR SYSTEMS ANALY N/A	ML	7	7 2	0	7 7	7				0			1 ;	3 1	0		7	2	2	0	8
HECKMAN HELP DESK TECHNI N/A	JM	7	7 2	5	5 0)		3	4	0		4	3 :	5 3	0		7	7	2	4	3
HEFFERNAN CONTROLLER N/A	W	2	2 4	6	4 1			1	0	0		1	9 :	5 3	0		2	6	6	9	4

ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ed more than \$10,000 in total disbursements affiliates.)	(before to the de	axe	s and		Allowa (E		s	fo	ourser or Offi Busine (F)	cial ess	ŀ	Other Disbursemer (G)	nts			ota (H)	1	· · ·	
неім	KE	9	1 2	2 4 4	1	<u></u> `1		0	2	1 6		9		0	1		<u> </u>	 1	4 3	-
GRAND LODGE REP		_				·					•				·	_	•	•		
N/A) 																		
HEMLER	AM	3	4 4	104	 			0				0		0		3	4 4	1	0 4	-
JR CLERK TYPIST																				
N/A									!					İ						
HENEIN	SJ	4	8 4	186			· -	0				0		0		4	8 4	1	8 6	,
ADMIN CLERK																				
N/A																				
HENSEL	DM	4	9 9	9 6 8				0		•	(0		0		4	9 9	9	6 8	_
ADMIN STENO		l																		
N/A														Ì						
HERRNSTADT	0	1 0	0 3	3 6 8		9	0 9	1	1	6 3	8 .	7		0	1	2	5 8	3	4 6	_
DIR INTERNATIONA																				
N/A																				

ORGANIZATION NAME:	FILE NUMBER:	lo o d	٦.	1	0.7
MACHINISTS AFL-CIO		0 0			~

(A) Name (List all employees who received from your organization and any all (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.) (if applicable)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
HILL ENGINEER N/A	RS	6 1 8 3 4	0	0	0	61834
HILL ADMIN STENO N/A	KM	47062	0	2 1	0	47083
HILL CLERICAL RECEPTI N/A	RS	33007	0	383	0	33390
HILL ASST COOK N/A	CS	29212	0	0	0	29212
HITCHCOCK INTERNATIONAL AF N/A	DM	91244	6 5 9 5	18040	0	115879

NIZATION NAME:	FILE NUMBER: 0 0 0 - 1 0 7
CHINISTS AFL-CIO	<u> </u>

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ed more than \$10,000 in total disbursements y affiliates.) On (if applicable)	Gro (befor other		xes ucti	and	Allowan	ces		Disbursements for Official Business (F)	Other Disbursements (G)			otal H)		•
HOFFMAN GRAND LODGE REP N/A	RL		9 1	2	4 4	1 2 4	3 (0	27587	0	1	3 -	1 2	2 6	6 1
HOLDER EDUCATION REP N/A	М		8 1	1	3 9	7	1 (0	1348	0		8 3	3 1	5	7
HOLLOWAY UTILITY WORKER N/A	DK	į	3 5	8	0 6		(0	0	0		3 5	5 8	3 () 6
HOLTON HOUSEPERSON N/A	BR	,	3 0	5	9 2		(0	0	0		3 (D	5 9	9 2
HONOHAN AIRCRAFT MECHANI N/A	RB	ļ	5 6	3	7 9	5 4	3 (0	417	0		6 2	2 2	? 2	2 6

ORGANIZATION NAME: MACHINISTS AFL-CIO	FILE NUMBER: 0 0 0 - 1 0 7
INIACI IINIG 13 AFE-CIO	

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ed more than \$10,000 in total disbursements affiliates.) On (if applicable)	Gr (befo		axes duct	s an		Allowar (E)	ces	;	Disbursemen for Official Business (F)	ts	Other Disbursements (G)			Tot (H			
HOUSER JR CLERK TYPIST	NA		3 (6 6	5	6			0		0	0		3	6	6	5	6
N/A																		
HOWE RESEARCH AGREEME N/A	DM		7 2	2 2	2 4	7	1	0	0	8 4	5	0		7	3	1	9	2
HURD ADMIN ASST	TR	1	0	7 4	1 3	1	7 8	9	8	1 2 9 0	1	0	1	2	8	2	3	0
HUX III SYSTEMS ANALYST N/A	WE		7 :	2 5	5 5	0	_		0	7 5	2	0		7	3	3	0	2
HYDE ADMIN CLERK TYPI N/A	DJ		4 4	4 7	7 0	6			0		0	0		4	4	7	0	6

ORGANIZATION NAME:
MACHINISTS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2002

FILE NUMBER: 0 0 0 - 1 0 7

(A) Name (List all employees who received me from your organization and any affit (B) Position (Enter employee's job title.)	ore than \$10,000 in total disbursements liates.)	Gros (before other d	tax	es	and		Allow	vano	202		sbur for C	Offic		Other Disburseme	nte			Γota	.1		
(C) Name of Affiliated Organization	(if applicable)		(D)		•			E)			(F)		(G)	/11t3			(H)			
JACKSON EDUCATION REP	не	8	2	0	8 7	7	1	2	7 ()	5	1	2 1		0		8	8	4	7	8
N/A																					
JEFFRIES EXECUTIVE SECRET	BE	8	3	7	3 0				C)			1 6		0		8	3	7	4	6
N/A																					
JENNINGS BUS DRIVER/UTILI	MA	4	9	0	9 3	3			C				0		0		4	9	0	9	3
N/A		1				ŀ															
JEZERCAK GRAND LODGE AUDI N/A	Р	9	1	2	4 3	3	9	8	9 5	5	2 3	0	6 0		0	1	2	4	1	9 ;	В
JOHNSEN SPECIAL REP	RD	8	6	7	8 4	1	8	6	4 0)	1 8	0	6 6		0	1	1	3	 4	9	0
N/A					***																

ORGANIZATION NAME:

MACHINISTS AFL-CIO

ENDING DATE OF PERIOD COVERED: 12/31/2002

(A) Name (List all employees who received more from your organization and any affiliate (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if a		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
JOHNSON GRAND LODGE AUDI N/A	D	98965	1 3 0 4 0	27001	0	139006
JOHNSON DIR HUMAN RIGHTS N/A	С	58673	4 5 0 0	13249	0	76422
JOHNSON UTILITY WORKER N/A	D	35351	0	0	0	35351
JOHNSTON ACCOUNTANT N/A	TC	83666	2 0	4 0	0	83726
JONES SUPERVISOR OF RE N/A	LL	76504	0	0	0	76504

ORGANIZATION NAME:

MACHINISTS AFL-CIO

ENDING DATE OF PERIOD COVERED:

12/31/2002

FILE NUMBER: 0 0 0 - 1 0 7

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.) (if applicable)	Gro (befor other	e ta	xes uct	s and		A	llowa (E		es		ourse or Of Busin (F	ficia iess	1	Other Disbursements (G)	S		•	Γota (H)			
JORDAN SR UTILITY WORKER N/A	GZ	3	3 4	ļ 1	7	0				0				0	0			3	4	1	7	0
JOY OFFICE SYSTEMS A N/A	JL	3	3 4	l C	9	8				0				0	0			3	4	0	9	8
KELLY GRAND LODGE REP N/A	Н	8	3 9	9 0	0	6		8	7 6	5 1	2	3 (8 8	3 7	0		1	2	1	4	5	4
KELTY ADMIN ASST N/A	R	1 () () 3	3 6	8		9 (6 5	5 2	2	2 (6 8	4	0		1	3	2	7	0	4
KENDALL GRAND LODGE AUDI N/A	P	8	3 5	5 5	5 3	4	1	2 ;	3 2	2 0	2	8 3	3 8	7	0		1	2	6	2	4	1

ORGANIZATION NAME: MACHINISTS AFL-CIO	FILE NUMBER: 0 0 0 -	1 0	7
ENDING DATE OF PERIOD COVERED:			

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(B) Position (Enter employee's job title.)	more than \$10,000 in total disbursements iffiliates.)	Gi (befo	r de	axe duc	es ar	nd	Allowances	I	Disbursements for Official Business	Other Disbursements				tal		
(C) Name of Affiliated Organization	η (if applicable)		(1) 			(E)	_	(F)	(G)			(F	1)		
KENNEDY	DE	1	0	0	3 6	8	8970		10900	o	1	2	2 0	2	3	8 1
DIR HPWO																
N/A																
KEYS	BS		6	3	2 7	7	С	,	0	0	-	6	3	2	7	7
ENGINEER																
N/A								ļ								
KING	MD		8	2	1 1	9	9110		18200	0	1		9	4	. 2	 ? 9
COMMUNICATIONS R								l		,						
N/A	•									'						
KINION	FM		1	6	8 9	5	C		0	0		1	6	8	9) 5
BARTENDER								١								
N/A																
KINNEY	PK		3	5	4 6	6	С	,	0	0		3	3 5	4		 5 6
ADMIN OFFICE SYS																
N/A																

12/31/2002

ORGANIZATION NAME: MACHINISTS AFL-CIO	FILE NUMBER: 0 0 0 - 1 0 7
ENDING DATE OF PERIOD COVERED:	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who rece from your organization and a (B) Position (Enter employee's job title. (C) Name of Affiliated Organiza	- · · · · · · · · · · · · · · · · · · ·	Gro (befor other		ixe: luct	s an			Allo	war (E)		3	Disbursements for Official Business (F)	Other Disbursements (G)				otal		
KLIMA GRAND LODGE REP N/A	TJ		9 -	1 2	2 4	3	_	1 2	! 1	7	0	28134	0	1	3	3 1	5	4	. 7
KLINAKIS GRAND LODGE REP N/A	AS		9 -	1 2	2 4	3	•	1 0	7	7	5	36370	0	1	3	8	3 3	8	8
KNODE ADMIN CLERK N/A	TE		4 4	1 8	96	6					0	0	0		4	 1 4	9	6	6
KNOTT HELP DESK TECHNI N/A	РМ		5 8	 8	3 6	1					0	0	0		5	- 8 6	8	6	1
KOBILIS ACCTNG TECHNOLOG N/A	РМ		5 4	1 6	5 5	2				<u></u>	0	3682	0		5	8 8	3	3	4

12/31/2002

ORGANIZATION NAME:
MACHINISTS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2002

(A) Name (List all employees who received more the from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if application)		Gro (befo other	de	axe	s a	nd		Allov	van (E)	ces		Disburse for Off Busin (F)	icial ess	Other Disbursements (G)	3		To			
KOBILIS OFFICE ASSISTANT N/A	BR		1	1 4	4 1	1 7					0	•	50	0		1	1	5	6	7
KOOY JR SECRETARY N/A	KA		4	 5 (6 6	3 5					0		2 1	0		4	5	6	8	6
LARKIN COMMUNICATIONS R N/A	FG		8		1 1	1 2		2	0	9	0	1 (9 9	0		8	5	3	0	1
LAUTAR GRAND LODGE REP N/A	JD	÷	9	1 2	2 4	1 3		5	6	1	0	136	6 0 9	0	1	 I 1	0	4	6	2
LEE GRAND LODGE AUDI N/A	Т		9	1 2	2 4	1 3	1	2	5	7	0	326	6 8	0		1 3	6	4	8	1

· · · · · · · · · · · · · · · · · · ·	

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ed more than \$10,000 in total disbursements y affiliates.) On (if applicable)	Gro (befor	re ta	axe: duct	s an		ļ A	llow.	anc E)	es) f	or O	emer fficial ness		Other Disbursements (G)	5		•	Tota (H)			
LEE NETWORK ADMINIST N/A	TR		6	7 1	1 2	0				4 0			5	4	0			6	7	2	1	4
LEE INFO TECHNOLOGY N/A	CC		5 2	2 6	3 1	4				0				0	0			5	2	6	1	4
LEHMAN GRAND LODGE REP N/A	PA		9	1 2	2 4	3	1	3	6	4 0	2	7	8 5	7	0		1	3	2	7	4	0
LEMON GRAND LODGE REP N/A	R		9	1 2	2 4	3	1	7	2	6 5	2	9	3 2	4	0		1	3	7	8	3	2
LESLIE DIR W.W. WINPISI N/A	JD	1	3	1 (6	6		8	0	8 5	1	3	7 8	9	0		1	5	2	9	4	0

FILE NUMBER: 0 0 0 - 1 0 7 MACHINISTS AFL-CIO

ENDING DATE OF PERIOD COVERED: 12/31/2002

ORGANIZATION NAME:

(A) Name (List all employees who received from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements affiliates.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
LEWIS CONFIDENTIAL SEC N/A	PA	7 3 1 8 5	0	171	0	7 3 3 5 6
LEWIS ACCTNG TECHNOLOG N/A	BA	56403	0	1 0	0	56413
LEWIS ASST COOK N/A	MR	3 2 4 3 4	1 9 5	1 2 3	0	32752
LEWIS JR. EDUCATION REP	ED	8 1 1 2 1	9795	16436	0	107352
LILLIS GRAND LODGE REP N/A	MS	88685	6285	13335	0	108305

ORGANIZATION NAME:

MACHINISTS AFL-CIO

FILE NUMBER: 0 0 0 - 1 0 7

ENDING DATE OF PERIOD COVERED: 12/31/2002

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements affiliates.) on (if applicable)	Gr (befo	r dec	axe	s ai	nd	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)				otai H)		
LOCKE GRAND LODGE REP N/A	R		9	1 :	2 4	1 3	7 3 9 0	21454	0	1	1 :	2 (0 0) {	3 7
LOCKS UTILITY WORKER N/A	AA		3	5 8	8 1	8	0	0	0		į	3 5	5 8	} -	8
LONDON GRAND LODGE REP N/A	DP		9	1 :	2 4	1 3	1 6 8 8 5	37999	О	1	1 4	4 (3 1	2	2 7
LOWE GROUNDSKEEPER N/A	CD		3 (6 1	8 7	7 9	1 9 5	0	0		;	3 7	7 0) 7	7 4
LUBETSKI UTILITY WORKER N/A	RC		3	5 4	4 5	5 9	0	0	0		•	3 \$	5 4	. 5	5 9

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ORGANIZATION NAME:

MACHINISTS AFL-CIO

ENDING DATE OF PERIOD COVERED: 12/31/2002

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who refrom your organization and (B) Position (Enter employee's job titl (C) Name of Affiliated Organization		Gross S (before tax other dedu (D)	ces and octions)		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)	
LUMPKINS ASST COOK N/A	SA	3 1	214	4		0	0	0	3 1 2	1 4
MADDEN SR STENO N/A	AE	4 7	106	6		0	1 5	0	471	2 1
MARTINEZ EDUCATION REP N/A	RG	8 6	58(0	1321	5	34142	0	1339	3 7
MASON GRAND LODGE REP N/A	LT	9 1	243	3	1 5 7 1	5	3 2 4 4 9	0	1394	0 7
MASZTAL GRAND LODGE AUDI N/A	GT	8 4	584	4	1112	0	29044	0	1247	4 8

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ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2002	

(A) Name (List all employees who receifrom your organization and at (B) Position (Enter employee's job title. (C) Name of Affiliated Organization		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
MAZZOCCO GRAND LODGE REP N/A	VL	61412	5270	16268	0	82950
MAZZULLO ADMIN STENO N/A	TL	69974	0	2 1	0	69995
MCCARTHY ADMIN STENO N/A	MR	20622	0	1 5 0	0	20772
MCCAW ENGINEER N/A	K	80752	0	0	0	80752
MCGARRY DIR COLL BARGAIN N/A	RC	112217	10065	23387	0	1 4 5 6 6 9

ORGANIZATION NAME:

MACHINISTS AFL-CIO

ENDING DATE OF PERIOD COVERED: 12/31/2002

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements affiliates.) on (if applicable)	Gi (befo	r de	axe	es a	and		Allowanc (E)	es	Disburs for Of Busir (F	ficia 1ess	.l	Other Disbursements (G)		•	Γota (H)		
MCHUGH ASST GENERAL COU	МІ	ē	8	3	0	98	3	5 5	1 0	4	8 0	8	0		9	2	6	9 (
MCMANNIS ADMIN CLERK N/A	MD		4	4	8	9 7	7		0			0	0		4	4	8	9 7
MESSINA SR STAFF SECRETA N/A	SL		5	9	0	6 6	3		0			6	0		5	9	0	7 2
MICALLEF EDUCATION REP N/A	CN		9	3	3	4 0		8	1 5	16	7 7	4	0	1	1	0	9	2 (
MICHALSKI DIR LEGIS POLITI N/A	RP	1	3	1	0	6 6		1 1 2	7 5	3 4	8 7	9	0	1	7	7	2	2 (

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ORGANIZATION NAME:
MACHINISTS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2002

FILE NUMBER: 0 0 0 - 1 0 7

(A) Name (List all employees who received more than \$10,000 in total disburser from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
MICHEL JI GRAND LODGE REP N/A	91243	8230	18714	0	118187
MILBURN TD INFO TECHNOLOGY N/A	21222	0	0	0	21222
MILLER SL GRAND LODGE REP N/A	9 1 2 4 3	13185	23061	0	127489
MINNICH RA GRAND LODGE AUDI N/A	9 1 2 4 3	10525	32982	0	134750
MISKOLCZI DH EDUCATION REP N/A	82087	5 1 0	712	0	83309

PRGANIZATION NAME:		
MACHINISTS AFL-CIO		
AAOI III VIOTO AI L-OIO	 	
NOING DATE OF BERIOD COVERED.	 	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	f more than \$10,000 in total disbursements affiliates.) N (if applicable)	Gross (before other de	taxe	s ar	nd	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)		To (H	tal	•	
MITCHELL ADMIN STENO N/A	CA	4	7	1 3	3 1	0	5 8	0	2	1 7	1	8	3 9
MODLIN SR SYSTEMS ANALY N/A	JE	7	9	5 1	1	0	0	0	7	7 9	5	1	1
MONTGOMERY CONFIDENTIAL SEC N/A	RA	6	9 :	9 7	4	0	212	0	7	7 0	1	8	6
MOORE HOUSEPERSON N/A	D	5	1 :	9 4	- 0	0	0	0	F)	5 1	9	4	- 0
MORAN DIR INFO SYSTEMS N/A	JF	1 3	1 (0 1	4	5000	16074	0	1 5	5 2	0	8	8

12/31/2002

ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2002	

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.)	more than \$10,000 in total disbursements filiates.)	Gr (befo		axe	s ar	nd		Alle	OW.	anc	98	f	burs or C Busi	ffici		Other Disburseme	nts			To	tal		
(C) Name of Affiliated Organization	(if applicable)		([D)				, ,,,,	(E				(1	=)		(G)					1)		
MORAN	BA	<u> </u>	7	2 !	5 5	5 0				1	B 0				2 6		0		7	2	6	5	6
HELP DESK TECHNI							1																
N/A		i																					
MORRIS	P		9	1 2	2 4	1 3		1 :	8	2	4 5	4	. 0	7	2 4		0	1	5	5 0	2	_	2
GRAND LODGE REP																							
N/A																							
MUNOZ	СМ		8	7	7 S	3 4		•	7	1 :	2 5	2	2	9	5 7		0	1	1	7	8	1	6
GRAND LODGE REP																							
N/A		;																					
MURPHY	P		9	1 2	2 4	1 3		1	7	5 8	8 7	4	. 0	1	1 7		0	1	4	 l 8	9	4	7
SPECIAL REP																							
N/A																							
MURPHY	CG		3	3 9	9 8	3 9	-				0				0		0		3	3 3	9	8	9
ASST COOK																							
N/A																							

ORGANIZATION NAME: MACHINISTS AFL-CIO		
ENDING DATE OF PERIOD COVERED: 12/31/2002	** -	

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements iffiliates.)	Gr (befo	r de	axe	s an		Allov	var (E)		,		urse or Of Susin	ficia ness	ıl	Other Disbursements (G)				ota H)	 	
MYERS III GRAND LODGE REP N/A	GN		9	1 2	2 3	6	1 4	4	0	0	2	7	7 9	9 1	0	1	(3 ;	3 4	4	2 7
NARCROSS KWE LIFEGUARD N/A	JA		3	0 9	9 3	1	!			0				0	0		;	3 (0 9	€	3 1
NAUYALIS GRAND LODGE REP N/A	RN		9	 1	2 4	3	8	5	3	5	2	0	2 4	1 4	0	1	2	2 (0 ()	2 2
NEDROW GRAND LODGE REP N/A	DL		9	0 2	2 8	6	9	4	8	5	2	1	9 1	1 5	0	1	2	2	1 (3	8 6
NEIGUS ASST GENERAL COU N/A	DL	1	0	3 (9	0	5	6	7	0		4	5 4	1 5	0	1	4	1 :	3 (3	0 5

ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
NEILL DM MECHANIC MASTER N/A	4 2 6 8 2	0	0	0	4 2 6 8 2
NELSON JJ HELP DESK TECHNI N/A	58861	4 0 0	5 6 1	0	59822
NELSON ML ASST ADMIN BOOKK N/A	47124	0	9	0	47133
NUGENT JR GRAND LODGE REP N/A	9 1 2 4 3	1 2 1 5 0	25391	0	1 2 8 7 8 4
NUGENT J GRAND LODGE REP N/A	91243	6700	17870	0	1 1 5 8 1 3

ORGANIZATION NAME: MACHINISTS AFL-CIO				
ENDING DATE OF PERIOD COVERED: 12/31/2002		-	 -	

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ed more than \$10,000 in total disbursements affiliates.) On (if applicable)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
OCHOA GRAND LODGE REP N/A	J	87106	6065	1 4 8 7 0	0	108041
OLIVER JR SECRETARY N/A	LM	41769	0	0	0	41769
OLSSON SPECIAL REP N/A	В	9 1 2 4 3	6 0 2 5	18746	0	1 1 6 0 1 4
ORTENZO ADMIN STENO N/A	BA	36644	0	0	0	36644
OVALLE MANAGER LIBRARY N/A	DM	56379	0	2 2	0	56401

ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

(A) Name (List all employees who received many from your organization and any affi	nore than \$10,000 in total disbursements liates.)	Gros (before				T					Disburse for Of		s	Other						
(B) Position (Enter employee's job title.)		other d	ledu	ictio			Αl	low	ance	es	Busir		l	Other Disburseme	nts		1	otal		
(C) Name of Affiliated Organization	(if applicable)		(D)	')					(E)		(F)			(G)		(H)				
PACHUCKI	CP	2	8	2	4 5	5				0		ļ	0		0		2	8 2	2	4 5
SR CLERK TYPIST						1														
N/A																				
PAGE	DM	4	6	5	6 (0				0			9		0		4	6 5	5 (5 9
ACCTNG TECHNOLOG																				
N/A																				
PALMER	RK	8	2	0	8 7	7		1	2 2	2 0	2		6		0		8	5 3	} 4	4 3
COMMUNICATIONS R		i																		
N/A																				
PANTOJA	SJ	9	0	4	3 9	9	1	1	4 6	5 5	3 3	1 1	8		0	1	3	 5 () 2	2 2
SPECIAL REP						1							1		}					
N/A																				
PAYNE	ММ	5	5	0	8 2	2			4 5	5 5	,	3 7	4		0		5	5 9) -	1 1
OFFICE ASSISTANT																				
N/A																				

ORGANIZATION NAME:

MACHINISTS AFL-CIO

ENDING DATE OF PERIOD COVERED:

FILE NUMBER: 0 0 0 - 1 0 7

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ed more than \$10,000 in total disbursements v affiliates.) On (if applicable)	Gr (befo	r de	tax	es icti	and		Allowances (E)			Disbursements for Official Business (F)			al	Other Disbursements (G)	Total (H)						
PEEK SR STAFF SECRETA	КМ		5	8	6	1	4			2 0	<u> </u>			7		<u> </u>	Ę		9		3	1
N/A				_												-					_	
PETERS ADMIN STENO N/A	CL		4	7	2	4	8			0		i	2 -	1 2	0		2	4	7	4	6	0
PICHLER	WJ		9	1	2	4	3	1 1 5	3	0	2	6	 2	9 2	0	-	1 2	 2	9	0	6	 5
GRAND LODGE AUDI																						
PIERCE GRAND LODGE REP N/A	WE		9	1	2	4	3	121	0	0	2	2	9 4	19	0		1 2	2	6	2	9	2
PINTO DIR COLL BARGAIN N/A	JA	-	5	7	7	1	9	5 7	1	0	1	1	9 8	3 6	0		7	7	5	4	1	5

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ORGANIZATION NAME:	
MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2002	

(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	f more than \$10,000 in total disbursements affiliates.) n (if applicable)	Gros (before other d	tax	es ictic	and		A	llowa (E	ance	s	fo	urser r Offi usine (F)	ess	Oth Disburse (G	ments			Tota (H)		-	
PITTMAN RESEARCH AGREEME N/A	DS	7	2	2	4	7			6	0		1	3 7	7	0		7	2	4	4	4
PITTMAN CONFIDENTIAL SEC N/A	L	2	: 0	3	8 4	4				0			(0		2	0	3	8	4
POLAND MANAGER OF MATER N/A	EE	5	1	9	4 (0	-			0		8	7 8	3	0		5	2	8	1	8
POOMAIHEALAN SPECIAL REP N/A	S	9	0	9	2 2	2	1	3	5 6	5	1	6 0	0 4	!	0	1	2	0	4	9	1
POPE GRAND LODGE REP N/A	К	9	1	2	4 ;	3		5	7 0	5	1	4 5	5 ()	0	1	1	1	4	9	8

ORGANIZATION NAME;	
MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
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(A) Name (List all employees who rece from your organization and a (B) Position (Enter employee's job title. (C) Name of Affiliated Organiza		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
PORTER GRAND LODGE REP N/A	DL	85205	9310	19707	0	114222
POWELL GRAND LODGE REP N/A	GO	15435	1 6 7 5	7609	0	24719
PRICE ADMIN CLERK N/A	WF	4 5 9 6 6	0	0	0	45966
PRICE JR COOR COLL BARGAI N/A	JE	100368	6960	16428	0	123756
PROVENCAL GRAND LODGE REP N/A	R	45618	0	8629	0	5 4 2 4 7

ORGANIZATION NAME:	 	
MACHINISTS AFL-CIO	 	
ENDING DATE OF PERIOD COVERED:		 =
12/31/2002		

(A) Name (List all employees who received more that from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if app		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
PRUD'HOMME SECRETARY N/A	s	4 2 6 5 2	0	0	0	42652
RALEY GUARD N/A	WA	37766	0	0	0	37766
READY UTILITY WORKER N/A	DM	33930	0	0	0	33930
REED SR CLERK TYPIST N/A	ИН	39399	0	0	0	39399
REID GRAND LODGE REP N/A	JA	91243	7960	18080	0	117283

ORGANIZATION NAME:
MACHINISTS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2002

(A) Name (List all employees who received from your organization and a (B) Position (Enter employee's job title. (C) Name of Affiliated Organization		Gro (befor		xe: uct	s an		Allowar (E)		s	Disburser for Offic Busine (F)	cial	Other Disbursements (G)	Total (H)					
REID COMMUNICATIONS R N/A	VL		5 8	3 1	1 6	7	1 2	3	5	3 4	7 3	0		6	2	8	7	5
RICE GRAND LODGE REP N/A	R		9 1	1 2	2 4	3	9 6	5	5	235	2 6	0	1	2	4	4	2	4
RICHARDS ADMIN STAFF SECR N/A	SL		2 1	5	5 0	3			0		0	0		2	1	5	0	3
RICHARDSON SR SYSTEMS ANALY N/A	SL		9 7	7 5	5 0	8			0	2	7 4	0		9	7	7	8	2
RIVERA GRAND LODGE REP N/A	LR	!	9 1	2	2 4	3	9 6	3	0	188	4 7	0	1	1	9	7	2	0

GANIZATION NAME:	
ACHINISTS AFL-CIO	
ING DATE OF PERIOD COVERED:	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more from your organization and any affiliate (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if		Gross Salary. (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
RIVERS BLDG RESTORATION N/A	РJ	37894	0	0	0	37894
ROBESON ADMIN CLERK TYPI N/A	ML	43303	0	0	0	43303
ROBINSON HELP DESK TECHNI N/A	JA.	68443	0	0	0	68443
RODRIGUEZ GRAND LODGE REP N/A	JV	91243	6080	16461	0	113784
RODRIGUEZ ADMIN SECRETARY N/A	М	25609	0	2252	0	27861

12/31/2002

ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)		Gro (before other	xes	s and		Allowances (E)			Disbursements for Official Business (F)			Other Disbursements (G)	1	Total (H)								
ROGERS ASST ADMIN BOOKK N/A	W	2	4 7	7 3	3 6	5				0				0	0		•	4	7	3	6	5
ROLAND ADMIN CLERK TYPI N/A	JM		3 8		7 3	0				0			1 5	0	0		•	3	8	В	8	0
ROSS EDUCATION REP N/A	PM	S	9 () ε	6 0	7	1	0 4	4 8	3 0	2	3 8	3 2	6	0		1 2	2	4 9	9	1	3
ROWLEY HOUSEPERSON N/A	TL	2	2 9	9 () 6	3				0				0	0		i	2	9	0	6	3
RUDIS GRAND LODGE REP N/A	W	ç	9 1	1 2	2 4	3	1	3 8	B 1	1 0	2	5 (8 (4	0		1 ;	3	0	1	3	7

ORGANIZATION NAME: MACHINISTS AFL-CIO	FILE NUMBER: 0 0 0 - 1 0 7
ENDING DATE OF PERIOD COVERED:	

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
RUSSELL CA INFO TECHNOLOGY N/A	5 2 4 8 3	0	0	0	5 2 4 8 3
SALIK JC ADMIN STENO N/A	47675	0	5 0	0	47725
SANDRIN M GRAND LODGE REP N/A	91243	9570	33167	0	133980
SANTIAGO GA ACCOUNTANT N/A	62736	0	9	0	62745
SANTOS FA GRAND LODGE REP N/A	91243	8670	21709	0	121622

ORGANIZATION NAME: MACHINISTS AFL-CIO	FILE NUMBER: 0 0 0 - 1 0 7
ENDING DATE OF PERIOD COVERED:	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

12/31/2002

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements affiliates.) On (if applicable)	Gro (befo other		ixes luct	s and		Allowances (E)	•	Disbursements for Official Business (F)	Other Disbursements (G)			ota (H))	
SAPP GRAND LODGE REP N/A	BD		9 -	1 2	2 4	3	1651	5	31077	0	1	3	8 8	3	3 !
SAPTEL GRAND LODGE REP N/A	В		8 2	2 1	1 1	9	8 5 8	2	23696	0	1	1	4 ;	3	9
SAVOIE CONFIDENTIAL SEC N/A	М		6 9	9 8	9 7	4		0	0	0	1	6	9 (9	7 4
SCHNEIDER COOR AEROSPACE N/A	RL	1	0 (o s	3 6	8	1 3 4 5	8	29984	0	1	4	3 (3	1 (
SCHOFIELD ADMIN CLERK TYPI N/A	JM		4 {	5 2	2 8	5		0	3 0	0	,	4	5 ;	3	1 :

ORGANIZATION NAME:	
MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2002	

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.) (if applicable)	Gi (befo	r de	axe	s a	nd	Allo	war (E)	nces	3	Disbursements for Official Business (F)	Other Disbursements (G)			To (H			
SCHROEDER ADMIN ASST N/A	LG	1	0	7 4	4 3	3 1	8	4	5	5	18580	0	1	3	4	4	6	6
SCHULER CONFIDENTIAL SEC N/A	DA		6	9 9	9 7	7 4		4	5	5	1586	0		7	' 2	0	1	5
SCOTT UTILITY WORKER N/A	GV		3	3 (0 5	5 8				0	0	0		3	3	0	5	8
SEIDL DIR GOVERNMENT E N/A	JW	1	0	2 4	4 7	7 2	2	7	8	0	9329	0	1	1	4	5	8	3 1
SHANNON ACCOUNTANT N/A	RE		9	9 2	2 6	8 8		_		0	0	0		9	9	2	6	8

ANIZATION NAME:	FILE NUMBER: 0 0 0 - 1 0 7
CHINISTS AFL-CIO	112 15 m2 1 m2 1 m2 1 m2 1 m2 1 m2 1 m2

ENDING DATE OF PERIOD COVERED: 12/31/2002

(A) Name (List all employees who receive from your organization and are (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization		Gro (befo other	r de	axe	es a	and		Allowa (E		ces		Disbursements for Official Business (F)	Other Disbursements (G)			ota			
SHEMANSKI SPECIAL REP N/A	PL		9	0	7	6 8	8	1 3	9	5	5	29504	0	1	3	4	2	2	7
SHEPHERD JR CLERK TYPIST N/A	KR		3	4	4	4 5	5				0	2 0	0		3	4	4	6	5
SHIPMAN GRAND LODGE REP N/A	W		9	1	2	4 3	3	8	4	2	8	30664	0	1	3	0	3	3	5
SHORT GRAND LODGE REP N/A	В	:	9	1	2	4 3	3	9	7	2	9	25670	0	1	2	6	6	4	2
SHORT GRAND LODGE REP N/A	SB		3	5	0	8 9	9	2	1	7	5	5370	0		4	2	6	3	4

RGANIZATION NAME:				
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MACHINISTS AFL-CIO		_		
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SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ed more than \$10,000 in total disbursements v affiliates.) On (if applicable)	Gr (befo	r de	axe	s a	nd	A		/an E)	ces		fc	or C Busi)ffic		Other Disbursements (G)			To (F			
SILBAS EDUCATION REP N/A	ML	!	8	2	1 1	19		9	7	0	2	2	2	5	6 9	0	1	1	4	3	ξ	0 (
SKIRVIN GRAND LODGE REP N/A	кв		9	1 2	2 4	1 3		9	2	0	0	1	9	4	9 3	0	1	1	9	9	3	3 6
SLATON EDUCATION REP N/A	JР		6	0 (6 3	3 6	1	6	6	3	5	3	2	1	7 7	0	1	0	9	4		8 4
SLEIGH DIR STRATEGIC RE N/A	SR	1		1 (0 6	6 6		9	0	3	0	1	8	6	0 8	0	1	5	8	7	() 4
SLOAN DIR COMMUNICATIO N/A	RS	1	3	8 :	5 8	3 6		4	9	6	0	1	6	9	0 2	0	1	6	0	4		8 4

12/31/2002

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ORGANIZATION NAME:		FILE NUMBER: 0 0 0 - 1 0 7
MACHINISTS AFL-CIO		<u> </u>
ENDING DATE OF PERIOD COVERED:		

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who receive from your organization and are (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization		Gro (befo other	ded	axe	s ar	nd	Α	Allov (van (E)	ces	;	fe	or C Busi	ffic		Oth Disburs (G	ements				otal H)		
SMITH SPECIAL REP N/A	JD		9	1 2	2 4	3	1	1	4	7	0	2	6	3	3 8		0		1 2	2 9	€ 0	5	5 1
SMITH GRAND LODGE REP N/A	JL		9	1 :	2 4	3		8	4	6	5	1	7	7	3 <i>6</i>	3	0	,	1	1 7	7 4	. 4	1 4
SMITH GROUP LEADER N/A	VY		5 9	9 8	8 8	3 1					0				C		0			5 9	9 8		3 1
SOLOMON LAW CLERK N/A	HR		5 (0	7 4	1			8	3	0		1	7	7 5)	0			 5	3 3		1 6
SPAIN SPECIAL REP N/A	SW	,	9 (0 :	9 0	0 0	1	0	3	3	5	2	2	7	7 5		0		1 2	2 4	4 0	1 1	1 0

12/31/2002

ORGANIZATION NAME: MACHINISTS AFL-CIO	FILE NUMBER: 0 0 0 -	1 0 7
ENDING DATE OF PERIOD COVERED:		

12/31/2002

(A) Name (List all employees who received more than \$10,000 in total disbution from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
SPARKS BA MAID N/A	29233	0	0	0	29233
STACK DM COMMUNICATIONS R N/A	8 2 0 8 7	2210	1534	0	85831
STOUGH SM ADMIN STENO N/A	49135	0	0	0	49135
STRAHAN DW EDUCATION REP N/A	8 2 0 8 7	3 2 5	975	0	83387
STRAUB JC GRAND LODGE AUDI N/A	91243	15215	34319	0	140777

DRGANIZATION NAME: MACHINISTS AFL-CIO	
NDING DATE OF PERIOD COVERED:	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements affiliates.) on (if applicable)	Gro (befor other	e ta	ixes luct	s an		Allowar (E)	ices	}	Disbursements for Official Business (F)	Other Disbursements (G)			ital H)		
STREET GRAND LODGE REP N/A	W∨	•	7 4	1 7	7 4	8	5 0	9	5	12458	0	Ş	9 2	2 3	0	1
SULLIVAN ADMIN STENO N/A	DC	4	4 7	7 1	3	1			0	0	0	2	4 7	' 1	3	1
SULLIVAN-PAG JR EXECUTIVE SEC N/A	ВЈ		7 8	3 7	7 1	0	5	8	0	218	0		7 9	5	0	8
SUND DIR HUMAN RIGHTS N/A	CA	5	5 7	7 5	9 0	9	9 1	2	0	6211	0	7	7 3	3 2	4	0
SZLENDAK ASST GROUNDSKEEP N/A	KE	3	3 2	2 ,5	5 2	7			0	0	0	3	3 2	5	2	7

12/31/2002

ORGANIZATION NAME:	 	
MACHINISTS AFL-CIO	 	
ENDING DATE OF PERIOD COVERED:	 	
12/31/2002		

(A) Name (List all employees who received from your organization and any a	more than \$10,000 in total disbursements filiates.)	Gross Salary (before taxes and			-			Disbursements for Official	Other			-	_			
(B) Position (Enter employee's job title.)		other d	edu	ctio		l Ali	owa	nce	s	Business	Other Disbursements	 		Tota	ıl	
(C) Name of Affiliated Organization	(if applicable)		(D)				(E			(F)	(G)	(H)				
TACKETT	JM	9	1	2 -	4 3	1	1 2	2 1	0	28951	0	1	3	1	4	0 4
GRAND LODGE AUDI																
N/A																
TAYLOR	MD	4	7	1	0 4				0	2 1	0		4	7	1	2 5
ADMIN STENO						ı				}						
N/A																
TETTIMER	PE	3	9	2	4 7	-			0	1 4 2	0		3	9	3	8 9
JR CLERK TYPIST																
N/A																
THAYER	JM	8	2	0	8 7		1 9	9 6	0	15157	0		9	9	2	0 4
RESEARCH ECONOMI																
N/A										ļ						
THOMAS	AM	4	7	5	6 4				0	3651	0		5	1	2	1 5
ADMIN CLERK TYPI																
N/A																···

ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

(A) Name (List all employees who received in from your organization and any aff (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements iliates.) (if applicable)	(before to other de	axe	s ar	nd	Allowances (E)	С	Disbursements for Official Business (F)	Other Disbursements (G)			Tot (H			
THOMPSON UTILITY WORKER N/A	WL	3	4 2	2 1	5	0		0	0		3	4	2	1	5
TIBERI COMMUNICATIONS R N/A	JM	8	2	1 1	9	6610		16780	0	1	0	5	5	0	9
TOBY GRAND LODGE REP N/A	CD	9	1 :	2 4	3	5 5 2 0		1 4 2 2 1	0	1	1	0	9	8	4
TRAINOR ADMIN STENO N/A	PA	4	7 8	8 5	8	0		0	0		4	7	8	5	8
TROTTER ASST DIR LEGIS P N/A	TW	9	0 (6 0	8	9390		24135	0	1	2	4	1	3	3

ORGANIZATION NAME: MACHINISTS AFL-CIO	FILE NUMBER: 0 0 0 - 1
ENDING DATE OF PERIOD COVERED:	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(B) Position (Enter employee's job title.)	B) Position (Enter employee's job title.) C) Name of Affiliated Organization (if applicable)		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
TRUE ADMIN CLERK N/A	JA	45355	0	4 0	0	45395
TSAMOUTALES ADMIN STENO N/A	JA	47019	0	2 2	0	47041
TUCKER ADMIN ASST N/A	LD	107431	9 2 8 5	15564	0	132280
TUCKER GUARD N/A	LM	19870	0	0	0	19870
TUMINARO CONFIDENTIAL SEC N/A	RG	69974	0	0	0	69974

12/31/2002

ORGANIZATION NAME:	
MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2002	

(B) Position (Enter employee's job title.	(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)		Gross Salary (before taxes and other deductions) (D)					Allowances (E)			Disbursements for Official Business (F)				Other Disbursements (G)		Total (H)				-		
TWEED ADMIN CLERK N/A	DA		4	7	1 4	1	77.4				0			- -	0		0	•	4	7	1	4	1
TYLER COMMUNICATIONS R N/A	JR		8	2	1 1	9		8	4	3	0	1 !	9 7	7 9	8	,	0	1	1	0	3	4	7
UNRUH PROJECT MANAGER N/A	VE	1	0	9 :	5 1	5			•		0				0		0	1	0	9	5	1	5
UPTON ASST DIR COMMUNI N/A	₩₩	1	0	1 :	5 3	3 6		1	1	3	5		2 1	2	4		0	1	0	4	7	9	5
VALLE GRAND LODGE REP N/A	YS		9	1 ;	2 4	3	1	3	7	7	0	2 9	9 5	5 3	2		0	1	3	4	5	4	5

ORGANIZATION NAME:	 	
MACHINISTS AFL-CIO		
NDING DATE OF PERIOD COVERED:	 	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(B) Position (Enter employee's job title.)	B) Position (Enter employee's job title.) C) Name of Affiliated Organization (if applicable)		r de	axe	lary s an		Allowa (E)			Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)					
VANDE KOLK GRAND LODGE REP N/A	DL		9	1 2	2 4	3	9 5	2	5	23342	0	1	2	2 4	1	1	0
VANDIVER TELEPHONE OPERAT N/A	вк		4	7 8	8 1	0			0	0	0		4	7	8	1	0
VARSEL ASST COOR AIRLIN N/A	JT	1	0	0 (3 6	8	7 4	4	5	28813	0	1	3	6	6	2	6
VODI GRAND LODGE REP N/A	S	1	0	0 (3 6	8	7 7	8	5	28666	0	1	3	3 6	8	1	9
WAGONER EDUCATION REP N/A	СJ		8	2 (0 8	7	1 3	0	0	6406	0		8	3 9	7	9	3

12/31/2002

ORGANIZATION NAME: MACHINISTS AFL-CIO	-	
ENDING DATE OF PERIOD COVERED: 12/31/2002		

(B) Position (Enter employee's job title.)	(B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
WALLACE CLERK TYPIST N/A	SJ	15635	0	0	0	15635
WALLICK COMMUNICATIONS R N/A	D	78296	2630	6856	0	87782
WALSH DIR ORGANIZING N/A	K	131066	8 4 7 5	15016	0	154557
WALTER SUPERVISOR N/A	JA	70187	6 5 0	2982	0	73819
WARDLE SPECIAL REP N/A	М	91243	1 1 3 9 0	24685	0	127318

ORGANIZATION NAME:	
MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2002	

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.)	d more than \$10,000 in total disbursements affiliates.)	Gr (befo	r de	axe duc	es ai	nd		Alic	owa	ınc	es			urse or Of Busir	ficia	d	Other Disburseme	nts		Т	otal	l		
(C) Name of Affiliated Organization	n (if applicable)		(I	D)			<u> </u>		(E)			(F)				(G)				(H)			_
WASHAM	LJ		9	1 .	2 4	1 3	1	1 .	5 9	9 .	4 (o	3	1 :	5 5	5 1		0	1	3	8 7	7	3	4
GRAND LODGE REP																								
N/A																								
WEDDING	ВА		5	2	4 1	۱ 4						0				0		0		5	2 4	4	1	4
INFO TECHNOLOGY												İ												
N/A																								
WEEKS	ML		1	2	0 4	1 2					(0		0		1	2 ()	4	2
ASST COOK																								
N/A																								
WEEMS	DA		3	3	 7 6	3				•	(o	•••			0		0		3	3 7	7	6	3
MAID																								
N/A																								
WEITZ	DK		7	3	3 2	2 2	1	1 (5 -	4 8	в	2	3	1 8	3 7		0	1	0	7 ()	5	7
CO-PILOT																								
N/A																								

ORGANIZATION NAME:	
MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2002	

(A) Name (List all employees who receive from your organization and and (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ed more than \$10,000 in total disbursements y affiliates.) On (if applicable)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
WERTZ ADMIN CLERK TYPI	SE	4 4 7 3 7	0	0	0	4 4 7 3 7
N/A						
WHITAKER GRAND LODGE REP N/A	DC	91243	1 0 4 7 0	26754	0	1 2 8 4 6 7
WHITE RESEARCH ECONOMI N/A	DB	80305	2 1 8 0	7 4 6 5	0	89950
WHITE SR NETWORK ADMIN N/A	HD	83830	2 0	0	0	83850
WIBLE MAINTENANCE MECH N/A	RM	42307	0	0	0	42307

ORGANIZATION NAME:
MACHINISTS AFL-CIO
ENDING DATE OF PERIOD COVERED:

FILE NUMBER: 0 0 0 - 1 0 7

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more from your organization and any affiliate (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if		Gro (befor other		xes ucti	ane		Allowan (E)	ces		Disbursements for Official Business (F)	Other Disbursements (G)			To (ŀ			
WIBLE GROUNDSKEEPER N/A	JM	2	2 8	8 8	17	9		(0	0	0		2	8	8	7	7 9
WILLIAMS SPECIAL REP N/A	L	Ç	96	6 4	8	4	1 3 2	4 (0	33235	0	1	4	2	9	5	5 9
WILSON SPECIAL REP N/A	SJ	2	2 0) 1	2	2	6 3	0 4	5	5 4 4 4	0		3	1	8	7	7 1
WINDSOR CONFIDENTIAL SEC N/A	LA		7 5	5 7	' 9	8	3	9 (0	1 3 7 4	0		7	7	5	6	5 2
WINDSOR SR STENO N/A	JE	4	4 9) 6	3 2	5		(0	9 6	0		4	9	7	2	2 1

12/31/2002

ORGANIZATION NAME: MACHINISTS AFL-CIO ENDING DATE OF PERIOD COVERED: 12/31/2002

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$1 from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)		Gros (before other o	e ta	xes ucti	and		A	llow (E	and	es		fo	ours or O Busi (F	ffici nes		Othei Disbursen (G)				Tot (H			
WINKLER GRAND LODGE REP N/A	CJ	g	9 1	2	. 4	4	1	3	3	1 9	9	3	6	6	8 3		0	1	4	1	2	4	6
WINPISINGER SPECIAL ASST TO N/A	М	1 2	2 3	3 5	i 4	5		5	3	5 (0	1	3	0	4 5		0	1	4	1	9	4	0
WINTERS SR STAFF SECRETA N/A	SR	5	5 8	3 5	5 4	8	-			(0				2 2		0		5	8 8	5	7	0
WITTKOP SPECIAL REP N/A	R	g	9 1	2	4	3		8	5	6 5	5	1	8	3	 7		0	1	1	8	1	8	0
WOLTZ GRAND LODGE REP N/A	MD	8	3 3	3 6	3	9	1	1	9	6 5	5	2	1	6	2 6		0	1	1	7	2	3	0

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ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements ffiliates.) (if applicable)	Gro (befor	dec	ixe:	s an tions		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)			Tota (H)			
WOOD COMMUNICATIONS R N/A	RE		8 2	2 1	1 1	9	<u> </u>		41280	0	1	4	1		7	9
WOODWARD EXECUTIVE SECRET	JL		8 3	3 7	7 3	0	0)	6 7	0		8	3	7	9	7
WRIGHT ADMIN CLERK N/A	WJ		4 5	5 C) 1	6	0)	3 7 4	0		4	5	3	9	0
WRIGHT GROUNDSKEEPER N/A	ВМ	,	3 7	7 8	— 3 5	3	0)	0	0		3	7	8	5	3
YAVORSKY PILOT N/A	WC	1 (0 3	3 8	3 2	1	8 3 8 6	;	18048	0	1	3	0	2	5	5

DRGANIZATION NAME:	
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(A) Name (List all employees who received in from your organization and any after (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.) (if applicable)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
YOUNG GRAND LODGE REP N/A	J	1 2 6 2 8	1 2 2 5	3 4 4 5	0	17298
YOUNGER	В	45341	0	0	0	45341
ADMIN CLERK N/A						
						<u> </u>

	(
SCHEDULE 11 – BENEFITS	(continued)
ENDING DATE OF PERIOD COVERED: 12/31/2002	
ORGANIZATION NAME: MACHINISTS AFL-CIO	

Description (A)	To Whom Paid (B)		Amo (C	ount C)			
DEATH BENEFITS	MEMBERS	2	4	1	6	8	8
				ï			
						_	7877788
					_		
			-				

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ORGANIZATION NAME:	
MACHINISTS AFL-CIO	
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SCHEDULE 13 – OFFICE & ADMINISTRATIVE EXPENSE (continued)

	,							
Description (A)			_		ount B)	t 		
RENT AND LEASES	<u> </u>		5	7	2	7	1	6
TRANSPORTATION (NON-ALLOCABLE)		2	7	4	6	5	8	0
TELEPHONE			9	3	9	7	3	8
MAINTENANCE AND UTILITIES			8	6	6	9	1	9
LODGING			5	2	5	7	7	8
MEETING AND CONFERENCES			1	6	1	6	5	5
						,		
			<u>.</u>					
							•	
			<u></u>					
							_	

ORGANIZATION NAME: MACHINISTS AFL-CIO		
ENDING DATE OF PERIOD COVERED:	 	

SCHEDULE 1 – LOANS RECEIVABLE (continued)

men	List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to Outstanding at		Loans Made	Repayments Received During Period			Loans Outstanding at			•						
busi	ness enterprises regardless of amount. (A)		Start	of P (B)	erio	ď		During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	En	d o	Per E)	iod		
4.	Name: H. PRUITT Purpose: PURCHASED GA. R.E. Security: NONE Terms: MONTHLY 603.36		4	4	0	2	5	0			3			4	8	1
5.	Name: TEAMSTERS NEWS Purpose: FINANCIAL ASSISTANCE Security: NONE Terms: ON DEMAND		5	0	0	0	0	0	C	0	5	 5 '	0 ()	0 (2
6.	Name: GURU NANAK FOUNDATIO Purpose: PURCHASE OF LAND Security: PROPERTY Terms: 9,640 MONTHY	1 4	4	8	8	1	8	0	13285	0	1 4 3	3	5 !	5	3 (3

ORGANIZATION NAME: MACHINISTS AFL-CIO	 	
ENDING DATE OF PERIOD COVERED: 12/31/2002		

SCHEDULE 3 – OTHER ASSETS (continued)

Description (A)	Book Value (B)
POSTAGE AND OTHER DEPOSITS	2 6 1 5 8

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ORGANIZATION NAME: MACHINISTS AFL-CIO	FILE NUMBER: 0 0 0	- 1 (0 7
ENDING DATE OF PERIOD COVERED: 12/31/2002			

SCHEDULE 5 - FIXED ASSETS: LAND (continued)

Description of Land (give location) (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
ST. MARY'S COUNTY, MD	680123		6 8 0 1 2 3	680123
			Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual	
	NO			

SCHEDULE 5 – FIXED ASSETS: BUILDINGS (continued)

Description of Buildings <i>(give location)</i> (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
ST. MARY'S COUNTY, MD	18333129	6321740	1 2 0 1 1 3 8 9	12011389
LEASEHOLD IMPROVEMENTS	221607	198105	2 3 5 0 2	23502

ORGANIZATION NAME: MACHINISTS AFL-CIO	FI
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SCHEDULE 6 - SALE OF INVESTMENTS AND FIXED ASSETS (continued)

Description <i>(if land or buildings, give location)</i> (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
OFFICE FURNITURE AND EQUIPMENT	4 0 4 8 2 1	86547	10320	10320
				
				

ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	

SCHEDULE 7-PURCHASE OF INVESTMENTS AND FIXED ASSETS (continued)

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
FURNITURE AND EQUIPMENT	438214		438214
AUTOMOBILE	11975	11975	11975
OTHER ASSETS	2161084	2161084	2161084
LAND	20310	20310	20310
·			
		,,,,,,	

ORGANIZATION NAME: MACHINISTS AFL-CIO	 	 _
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75. ADDITIONAL INFORMATION

em Number				
11	The Grand Lodge Participates in the administration of the following organizations, each of which is required under ERISA to file an Annual Return/Report with the U.S. Department of Labor:			
	Purpose	Name and Address	Federal EIN	
	Pension Benefits	International Association of Machinists and Aerospace Workers Pension Plan 9000 Machinists Place Upper Marlboro, MD 20772	53-6001417	
	Pension Benefits	IAM National Pension Fund 1300 Connecticut Avenue N.W. Washington, D.C. 20036	53-0259064	
	Health and Welfare Benefits	The National IAM Benefit Trust 1300 Connecticut Avenue N.W. Washington, D.C. 20036	36-6562520	

ORGANIZATION NAME: MACHINISTS AFL-CIO			
ENDING DATE OF PERIOD COVERED:		 	

m Number			
12	The Grand Loc	dge also participates in the adminis	stration of the following organization, which files reports with the Federal Election Commission
	Political The activity of	Machinists Non-Partisan Political League 9000 Machinists Place Upper Marlboro, MD 20772 the PAC Fund is not included in thi	52-6144644, FEC ID #C 00002469 is form LM-2.
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ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

75. ADDITIONAL INFORMATION (continued)

Item Number 13	Depreciation expense for the year ended December 31, 2002 was \$3,392,933.	
10	Depression expense for the year ended December 51, 2002 was \$6,002,000.	
		:
orm LM-2 (Revis	rised 2000) 4 - I75	17

ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

75. ADDITIONAL INFORMATION (continued)

Calibre CPA Group, PLLC, Certified Public Accountants, conducts an annual audit in accordance with generally accepted auditing standards.	Item Number	
	14	Calibre CPA Group, PLLC, Certified Public Accountants, conducts an annual audit in accordance with generally accepted auditing standards.
	•	
	1	

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75. ADDITIONAL INFORMATION (continued)

Item Number	
23	The December 31, 2002 note payable reported on Schedule 8, Line 1 was secured by an airplane with a net book value of \$5,971,868.
25	The December 31, 2002 hote payable reported on Schedule 6, Eine 1 was secured by an airplane with a net book value of \$5,971,000.
Farm LM O (Davios	

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ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

75. ADDITIONAL INFORMATION (continued)

em Number	
24	At December 31, 2002 the Grand Lodge was liable as guarantor on loans in the amount of \$50,000 on behalf of Work & Technology Institute, \$425,000 on behalf of Guide Dogs of America, \$250,000 on behalf of New Democrats of Canada Association, and \$100,000 on behalf of Nov Scotia New Democratic Party.

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DRGANIZATION NAME:	
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75. ADDITIONAL INFORMATION (continued)

m Number 28		in prior year there were U.S. Treasury Securities included in with item 29,
20	investments.	, in prior year there were 0.5. Treasury Securities included in with item 29,
M-2 (Revi	evised 2000) 8 -	175

 ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

75. ADDITIONAL INFORMATION (continued)

tem Number 29	Changed prior year total from \$149,564,709 to \$147,172,938 due to some U.S. Treasury Securites were included with Investments.
	Shanged phot year total from \$140,00 to \$147,17 2,000 dae to come one. Housing deciding from from from from from from the first from the firs
	d 2000) 9 - I75

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ORGANIZATION NAMÉ: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

75. ADDITIONAL INFORMATION (continued)

em Number		
LRR	The Grand Lodge sold property in Kansas City, MO to Local Lodge 778 Building Corporation and obtained a note receivable for \$300,000. note is non-interest-bearing and is due August 1, 2007.	
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MACHINISTS AFL-CIO	 	
ENDING DATE OF PERIOD COVERED:		
12/31/2002		

75. ADDITIONAL INFORMATION (continued)

m Number	
53	Statement B (Line 53)
	Contributions from individual members were collected for disbursement by the Union to a relief agency. Timing of receipts (Line 53) and timin of disbursements (Line 72) do not always match within the same colondar year.
	of disbursements (Line 72) do not always match within the same calendar year.
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ORGANIZATION NAME:	
MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2002	

75. ADDITIONAL INFORMATION (continued)

Schedules 9 and 10, (Statement B Lines 56 & 57)

Disbursements in connection with automobiles used 50% or more for official union business by officers and employees are included in Column (F) of Schedules 9 and 10; Disbursements to Officers and Employees. In some instances, certain automobile expenses could not be allocated to any one individual and thus, were reported in Item 73, Other Disbursements. Business usage of union owned/leased automobiles is based on estimates made by the individuals assigned the automobile. Business usage is estimated to be more than 50% of official union business. The remainder, if any, was for personal use.

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ORGANIZATION NAME: MACHINISTS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2002	

75. ADDITIONAL INFORMATION (continued)

m Number			
This line item reflects only disbursements	Statement B (Line 72) This line item reflects only disbursements on behalf of individual members for other than normal operating purposes. All expenses benefit the entire union membership and individuals are not normally singled out for special benefits.		